

**ONE OWNER PER ENTRY BLANK**

**THE SHELBYVILLE HORSE SHOW**

**July 31 – August 3, 2019**

**To be filled out completely including Street and Zip Code and Mailed to:**

**The Shelbyville Horse Show**

**65 Old Taylorsville Road**

**Shelbyville, KY 40065**

**(502) 314 7960 or horseshowentries18@gmail.com – Beth Snider**

**Make checks payable to The Shelbyville Horse Show**

For Office Use Only		<b>PLEASE PRINT OR TYPE</b>			
Horse/Pony Name					
Color	Sex	Age	Height		
Rider/Driver/Handler				Age Jr. Exhibitor	
Signature of R/D/H					
<b>CLASS #</b>					<b>TOTAL</b>
<b>ENTRY FEE</b>					

For Office Use Only		<b>PLEASE PRINT OR TYPE</b>			
Horse/Pony Name					
Color	Sex	Age	Height		
Rider/Driver/Handler				Age Jr. Exhibitor	
Signature of R/D/H					
<b>CLASS #</b>					<b>TOTAL</b>
<b>ENTRY FEE</b>					

For Office Use Only		<b>PLEASE PRINT OR TYPE</b>			
Horse/Pony Name					
Color	Sex	Age	Height		
Rider/Driver/Handler				Age Jr. Exhibitor	
Signature of R/D/H					
<b>CLASS #</b>					<b>TOTAL</b>
<b>ENTRY FEE</b>					

I hereby enter the above horses and riders at my own risk and subject to the rules and regulations of the Show. I further agree that if any damage is occasioned or loss occurs to the horses exhibited, to any vehicle or other articles which I may send with said horses, I will make no claim therefore against the Shelbyville Horse Show or any participating organizations.

Owner
Address
City/State/Zip
Phone
Signature

Make Checks payable to: <i>Circle One</i> OWNER      TRAINER
Social Security Number/Tax ID

Trainer/Agent
Address
City/State/Zip
Phone
Signature

	<b>TOTAL ENTRY FEES</b>	
#	Number of STALLS AT \$90 each =	
#	Exhibitor Badges @ \$15 =	
#	Number of BOX SEATS (6 seats per box) at \$350.00 each =	
	<i>OFFICE FEE PER HORSE \$20.00</i>	
	<b>TOTAL REMITTANCE</b>	