

Valentine's Classic Horse Show February 23-25, 2018

Pre-Entries Close - February 21st

Phone: 760-525-8933 Fax: 760-510-1211

ONLY ONE HORSE PER FORM

Entry # _____

HORSE			
Horse Name			
Color	Height		
Sex	Date of Birth	/	/
USHJA #	GSDHJA #		
Small	Med	Large	
1 YR	2 YR	SJR	LJR

OWNER OR AUTHORIZED AGENT
NAME OF OWNER
ADDRESS 1
ADDRESS 2
City/State/Zip
TELEPHONE
E-MAIL

TRAINER
NAME OF TRAINER
NAME OF BARN
ADDRESS
City/State/Zip
TELEPHONE
E-MAIL

RIDER ONE			
Name			
Address 1			
Address 2			
City/State/Zip			
E-Mail			
Date of Birth	/	/	GSDHJ #

RIDER TWO			
Name			
Address 1			
Address 2			
City/State/Zip			
E-Mail			
Date of Birth	/	/	GSDHJ #

PRIZE MONEY PAYEE	
Name	
Address 1	
Address 2	
City/State/Zip	
E-Mail	
Tax ID #	Soc Sec #

RIDER ONE CLASSES				

RIDER TWO CLASSES				

Office Use Only	
Deposit \$	Ck # _____
Close Out \$	CC _____

Every entry shall constitute an agreement and affirmation that the person making it, owner, lessee, trainer, manager, agent, coach, driver, rider and the horse: (1) shall be subject to the local rules of the show; (2) that every horse, rider and/or driver is eligible as entered; (3) that the owner and any of his representatives are bound by the rules of the show and will accept as final the decision of the hearing committee and any question arising under said rules and agree to hold the show, their officials, directors, employees, and agents harmless for any action taken, (4) that the owner rider/driver and any of their agents or representatives agree to hold the show and their officials, directors, employees and agents harmless for any injury or loss suffered during or in connection with the show, whether or not such injury or loss resulted directly or indirectly from negligent agents of promises of said officials, directors, employees or agents of the show. I agree to indemnify and save harmless THE 22nd DAA, Del Mar Horsepark, SCHC, and the Horse Show and singular, the directors, officers, members, employees, and agents thereof from and against any and all loss, costs or expenses, or any claim thereof, of whatever nature arising or to arise, for an on account, or by reason of the entries hereby made.

I hereby represent and agree that in the event that the entries hereby made are made for and on behalf of an exhibitor under the age of 18 years, that I am one of the parents of such minor, or duly appointed legal guardian of such minor, and as such, entitled to make this entry for and on behalf of such minor and I further hereby represent and agree that in the event that the entry hereby made for and on behalf of such another person other than a minor under the age of 18 years, I have full authority and privilege from such other person to make such an entry for and on behalf of such other person.

RIDER ONE/HANDLER	OWNER/AGENT	TRAINER	MANDATORY FEES
Signature _____	Signature _____	Signature _____	GSHJHA Fee 10.00
Print Name _____	Print Name _____	Print Name _____	OCHSA Fee 3.00
Signature _____	Signature _____	Signature _____	SCHC Fee 8.00
Print Name _____	Print Name _____	Print Name _____	Drug/Office/First Aid Fee 35.00
Signature _____	Signature _____	Signature _____	Nomination Fee 25.00
Print Name _____	Print Name _____	Print Name _____	

MAIL ENTRIES TO:
 Southern California Horsemen's Council
 P.O. Box 1064
 Bonsall, CA 92003

ENTRY FEES
 Jumper Classes \$30
 Hunter Classes \$25
 Medal Classes \$37
 OSHSA Medal Classes \$35

HORSE SHOW FEES

# _____	Stalls @ \$135	_____
# _____	Tack @ \$135	_____
# days _____	Haul In @ \$50	_____
# _____	Schooling Tix @ \$10	_____
# _____	Wristbands @ \$10	_____
# _____	Parking Permit @ \$20	_____
# _____	RV Parking @ \$250	_____
# _____	Class Sponsorship \$35	_____

CANCELLED STALL NOTICE
Any stalls reserved and then cancelled within 5 days of the horse show date will be assessed 1/2 the fee.
 Stall Reservations (760) 525-8933

MAKE CHECKS PAYABLE TO: 22nd DAA
www.schhorseshows.com

Total	\$
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