

Please Stable me with: _____

Trainer Pays ALL Fees: YES / NO

Trainer: Customer Pays own Fees: YES / NO

Pre-Entry (if delivered to show secretary by July 19): # of Classes _____ @ \$10/class \$ _____

Post Entry Fees (any entry received AFTER July 19): # of equines _____ @ \$25/equine \$ _____

Horse Show Awards: PREMIUMS: Ribbons will be awarded for first through sixth place ONLY in Junior Exhibitor/Youth Classes. All other class winners will receive national points ONLY.

Office Fee # of equines _____ @ \$10/equine \$ _____

Camper fees (if you hook up to electricity you have to pay this!)

Camping from Thursday 2pm to Saturday 7am: # of campers _____ @ \$65/camper \$ _____

Camping from Saturday 7am to Sunday 12 midnight # of campers _____ @ \$65/camper \$ _____

Stabling from Thursday 2pm to Saturday 7am: # of stalls _____ @ \$35/equine= \$ _____

Stabling from Saturday 7am to Sunday 12 midnight # of stalls _____ @ \$35/equine= \$ _____

Non-Stabled entries (show off trailer) Friday July 23 if not stabled _____ @ \$10/equine= \$ _____

(no limit on # of equines per stall) No equines may be left on trailer over night!

Sorry NO single day stall rentals. If you need to stay a little longer, see show manager for special arrangements.

Stall Cleaning Fee-(None!) Please dump manure in designated areas.

Non-Showing Equines (equines on grounds that do not show) _____ @ \$5/equine ____ #days=\$ _____

SHOW/CLASS SPONSORSHIP (\$25 suggested) \$ _____

Payment options (check your payment method): Total Due: \$ _____

_____ Check payable to *Classic Country Horse Association* , Check # _____

_____ Bill my credit card

Name on card: _____ Billing zip code on account: _____

Card number: _____

Security code: _____ Expiration Date: _____

Email/Number to send receipt: _____

Credit Cards will be accepted at the show with an additional 5% convenience fee charged. By signing below, I, the card holder agrees to pay the convenience fee of 5% and agree not to dispute or contest the charges.

Card holder signature: _____

_____ I have made a "friends & family" payment option to the Paypal account of teamassmann@live.com for the total amount owed.

(If applicable)

I certify that I am an Amateur as defined by the AMHR/ASPC Rules: _____

(Signature Required)

Release Statement: The undersigned hereby acknowledges that s/he is fully aware that participating in a horse show or other equine event involves inherent risk injury due to the behavior of the animal's involved and natural conditions. The undersigned hereby waives the right to institute a lawsuit for damages against or to recover damages from the American Shetland Pony Club, Inc. (ASPC) & American Miniature Horse Registry (AMHR), Sunshine Horse Show Series (SHSS) and the Classic Country Horse Assoc. (CCHA) based on any injury that occurs due to such inherent risk. The undersigned also affirms that s/he is solely responsible for choosing and maintaining the horse and equipment that the undersigned uses and that the undersigned waives any claim for damages against ASPC, AMHR, SHSS and CCHA based on any injury due to the behavior of any animal that participated in a horse show or other equine event sponsored by or affiliated with ASPC, AMHR, SHSS and CCHA due to an equipment failure or defect. The undersigned further acknowledges that ASPC, AMHR, SHSS and CCHA is not responsible for the conduct of other participants in such horse show and their animals and hereby waives any claim for damages against ASPC, AMHR, SHSS and CCHA based on injury due to the conduct of another participant in such event or other participants' animals. **Per NYS Law No. VAT1235, all riders 17 years of age and under must wear a helmet meeting or exceeding ASTM F1163 (SEI certified) Equestrian Standards. The parent/guardian signing below is personally responsible for seeing that the exhibitor in their care, custody and control obeys this law. By signing below all parties agree to follow the rules and regulation of this event and that of the affiliated organizations (ASPC, AMHR, SHSS, CCHA) and to pay the proper fees in full with sufficient funds.**

Signature: _____ Date: _____
Exhibitor (Or parent/legal guardian)