

29th UPHA CHAPTER 9 KENTUCKY FALL CLASSIC HORSE SHOW

ACADEMY AND NON USEF ENTRY FORM

October 8, 2016

Kentucky Horse Park, Lexington, Kentucky

Entries close October 4, 2016

One Horse per entry Blank
 Make checks payable to:
 Kentucky Fall Classic Horse Show
 Entries may be paid by credit card below

Mail To: Kentucky Fall Classic Horse Show
 65 Old Taylorsville Road
 Shelbyville, KY 40065
 Phone (502) 314-7960 or Fax (502) 633-6207
 Email: bethandscott@kih.net

PLEASE PRINT OR TYPE (Fill out completely)

Owner _____

Address _____ City/State/Zip _____

Trainer/Instructor _____ Stable _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____ email _____

Signature _____

	Office Use Only	Class	Entry Name	Rider/Handler	Age	City/State	Fee
1							
2							
3							
4							
5							
6							
						Total Entry Fees	

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 Kentucky Fall Classic Horse Show or any participating organizations.

	TOTAL ENTRY FEES	\$
#	STALLS @ \$125 EACH (week)	\$
#	OFFICE FEE PER ENTRY	\$ 20.00
	TOTAL REMITTANCE	\$

CHECK # _____ AMOUNT \$ _____ DATE RECEIVED _____ WE ALSO ACCEPT: VISA _____ MASTER CARD _____

CARD # _____ EXPIRATION DATE _____ SECURITY CODE _____

CARD HOLDER NAME (please print) _____ CARD HOLDER SIGNATURE _____

ALL HORSES MUST HAVE NEGATIVE COGGINS TEST PERFORMED WITHIN 12 MONTHS OF SHOW, AND HEALTH PAPERS FOR ALL HORSES CURRENT WITHIN 30 DAYS

CHECK # _____ AMOUNT \$ _____ DATE RECEIVED _____