

31st UPHA CHAPTER 9 KENTUCKY FALL CLASSIC HORSE SHOW

ACADEMY ENTRY FORM

October 6, 2018

Kentucky Horse Park, Lexington, Kentucky

Entries close October 2, 2018

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 @ \$150 EACH (week)	\$
#	OFFICE FEE PER ENTRY	\$ 25.00
	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 _____