Open Check/Credit Card Information to Release Number: □ Cash: \$ □ Check #:						
□Visa □ MC □ AMX CC:						
3or 4 digit #	Expiration Date:					

Color

Gender

□ Mare

Bonnie Lea Farm 511 North Street Williamstown, MA 01267 413-441-6349 (cell) demayolisa@gmail.com

Age

Pony Size

□ Small

Exhibitor #		

Horse Show Entry Blank

Name Of Horse

ONLY FULLY COMPLETED FORMS ACCEPTED

Owner's Name

				I Gelding		□Mediuı □Large		Green □ Yr 1 □Yr 2					
Name of Rider		Age	Appropriate		Street Address			City, State			Zip	WNEPHA	
			☐ Junior ☐ Amateur ☐ Amateur		er 35								□ Yes □ N/A
Class Numb	Class Numbers Entered (\$20 per class, including each warm-up, Class 1.) Totals								\mathbf{S}				
										#	^t Classe	es	
										A	At \$20 e	a	
WNE-PHA N	Medal Class Numbers I	Entere	tered (\$25 per class)					# Classes					
											At \$2	5 ea	
Leadline (\$15 for class) At \$15													
(1) shall be subject representatives are rules and agree to representatives ag show, whether or r	recognized show shall constitute and to the Constitution and rules of the bound by the Constitution and Rehold the show, the WNE-PHA, MHC, let to hold the WNE-PHA, MHC, lot such injury or loss resulted, direves the right to decline or refuse and	e Associat ules of the IC, NEHC NEHC, the ectly or in ny entry w	tion and the WNE-PHA T, their office show, and directly, front being the control of the control	e local rules of A, MHC, NEH cials, directors I their officials om the neglige ng liable for co nusetts Law, an	the show; C and the and empl s, directors ent acts or mpensation	(2) that every hor show will accept a oyees harmless fo s, employees and a omissions of said	rse, ricas fina r any ngents officia rom f	der, and/or driv al the decision o action taken; (4 harmless for an als, directors, en further competit for any injury t	er is eligible as of the hearing co) that the owner by injury or loss nployees or ager tion any exhibite o, or the death	entered; mmittee ; rider/o sufferents of the or or ho	(3) that the c on any que driver and d during or e WNE-PH rse should t	e owner an estion arisi any of thei in connect (A, MHC, I the best in	d any of his ng under said r agents or tion with the NEHC or show." terest of the
D: 1/D C:	Anna (alama)	//-	42- G:	((l)		T		(-1)			WNE-Pl		4 - 1 - 1
Kiaer/Parent Signa	der/Parent Signature (above) Owner/Agent's Signature (above)			Trainer's Signature (above)			BI	LF Stude	ent Fees:				
										Subt	otal (entry	fees above)	:
Rider's email (abov	ve) C)/A email ((above)			Trainer's email	l (abo	ve)		Of	ffice Fee	\$15.00	\$15.00
			-	Trainer's Print	ed Name:						Т	OTAL:	
NOTE: Entries for e	ach Horse/Rider combination <u>receiv</u>	ed prior to	5PM on the	e Friday prior t	to the show	will be entered in	a drav	ving <u>for free clas</u>	ses. Please see Ri	ıles & R	egulations f	or more inf	ormation.

Height