

# AMERICAN SADDLE HORSE BREEDERS FUTURITY OF KANSAS ENTRY FORM

**CHECKS TO COVER ALL FEES MUST ACCOMPANY ENTRIES  
ENTRIES CLOSE SEPTEMBER 16, 2011**

MAIL ENTRIES TO:  
SALINA CHARITY HORSE SHOW  
PO BOX 1160  
DERBY, KS 67037

ENTRY #	NAME OF HORSE <small>Class #'s Below Horses Name</small>	Total Entry Fees	Reg. #	NAME OF EXHIBITOR <small>Exhibitor Address</small>	ONE OWNER PER ENTRY BLANK																																																												
					Name _____																																																												
					_____																																																												
					Street _____																																																												
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					City _____																																																												
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<b>HORSE ARRIVAL DATE</b> <small>Stalls will not be available until Thursday, October 6, 2011 12:00 Noon Unless special arrangements are made</small>		<b>STABLE WITH</b> <small>Must Appear on Both Entry Blanks</small>		<b>BILL ENTRIES AND SEND PAYBACK TO:</b>  STABLE NAME _____  NAME _____  STREET _____  CITY _____ ST _____ ZIP CODE _____  PHONE NUMBER _____  <b>ALL PAYBACK MONEY WILL BE PAID TO THE ABOVE</b>																																																													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Total Entry Fees</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td>Stall Fee</td> <td>@ \$50</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Jump Out Fee - Per Horse</td> <td>@ \$15</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Office Fee - Per Horse</td> <td>@ \$10</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Post Entry - Per Horse**</td> <td>@ \$10</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Bag Shavings</td> <td>@ \$7</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Straw Bales</td> <td>@ \$6</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>Horse Show T Shirts</td> <td>@ \$15</td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td>(Specify Qty and Size)</td> <td></td> <td></td> <td></td> <td></td> <td>_____</td> </tr> <tr> <td><b>Total Due</b></td> <td></td> <td></td> <td></td> <td></td> <td style="border-top: 3px double black;">_____</td> </tr> </table>		Total Entry Fees						Stall Fee	@ \$50				_____	Jump Out Fee - Per Horse	@ \$15				_____	Office Fee - Per Horse	@ \$10				_____	Post Entry - Per Horse**	@ \$10				_____	Bag Shavings	@ \$7				_____	Straw Bales	@ \$6				_____	Horse Show T Shirts	@ \$15				_____	(Specify Qty and Size)					_____	<b>Total Due</b>					_____	Please Make Checks Payable to: Salina Charity Horse Show			
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We have read and accept the conditions under LIABILITY in the General Rules and Regulations and agree to hold Salina Charity Horse Show harmless for any damage, loss, injury or accident to property, animals or show participants.

Signature of Owner, Manager or Trainer \_\_\_\_\_

**ALL OUT OF STATE HORSES MUST HAVE A NEGATIVE COGGINS TEST PERFORMED WITHIN 12 MONTHS OF THE SHOW AND HEALTH PAPERS CURRENT WITHIN 45 DAYS  
COGGINS AND HEALTH PAPERS MUST BE PRESENTED AT HORSE SHOW OFFICE CHECK-IN BEFORE RECEIVING BACK NUMBERS**