

**OFFICE**  
**USE ONLY**

Pre                      Post  
CASH                    CHEC                    PAYPA

# SHOW OFF EQUINE EVENTS ENTRY FORM

Rider Name: \_\_\_\_\_ AGE: \_\_\_\_\_

Horse Name: \_\_\_\_\_ NOMINATED # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Trainer/Barn: \_\_\_\_\_

## Circle Class Numbers:

### SATURDAY

Halter 1 2 3 4 5  
Adult Western 7 23 33 44 54 70  
Youth Western 8 24 34 45 55 71  
Green/Novice 9 25 35 46 56 72  
Open Ranch 10 26 36 47 57 62 73  
Adult Ranch 11 27 37 48 58 63 74  
Youth Ranch 12 28 38 49 59 64 75  
WJ Ranch 13 29 39 50 60 65 76  
Open WTJ 14 30 40 51 61 77  
Adult WTJ 15 31 41 52 78  
Youth WTJ 16 32 42 53 79  
Leadline 17 18 19 20 21  
Other 22 66 67

### SUNDAY

Halter 80 81 82 83 84 85  
Adult Huntseat 86 98 105 113 120 124  
Youth Huntseat 87 99 106 114 121 125  
Beginner 88 100 107 115 126  
Schooling WTJ 89 101 108 116 127  
WTJ 11&under 90 102 109 117 128  
WTJ 12-39 91 103 110 118 129  
Jack Benny WTJ 92 104 111 119 130  
Leadline 93 94 95 96 97  
Other 96 122

2& Under Horse 68 123

Jr Horse 43 69 112

<b>Grounds Fee:</b> \$5 per horse/rider combo per day <b>circle one</b>	<u>\$5 single day or \$10 both days</u>
<b>Total Classes:</b> _____ @ \$10	\$ _____
<b>Stall Fee:</b> \$60	\$ _____
<b>Shavings \$8 Per Bag</b>	\$ _____
<b>Camper Fee: \$30 per night</b>	\$ _____
<b>Other:</b> _____	\$ _____
<b>Pre Entry Discount</b> (\$1 off per class if submitted with payment 1 week prior)	- _____
<b>TOTAL DUE:</b>	\$ _____

*I understand and accept the terms, conditions, and rules posted by Show Off Equine Events. I understand and accept that equine activities can be dangerous and that I may be exposed to risks that can cause serious injury or death. As a participant or spectator, I agree to full responsibility for any and all injuries or property damage sustained at this event, and to make no claim against Show Off Equine Events or any of its staff or volunteers for any injuries or damage regardless of cause. I have read the rules provided by SOEE and I agree to follow them. I agree that my presence on this facility and entry into competition confirms absolutely my agreement to be bound to these terms.*

SIGNATURE OF EXHIBITOR \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

**CHECKS PAYABLE TO: Show Off Equine Events (SOEE).** Returned checks and unpaid entries are subject to a \$25 service fee.

**MAIL TO: Show Off Equine Events** PO Box 201 Schaghticoke, NY 12154 **Email** [ShowOffEquine@gmail.com](mailto:ShowOffEquine@gmail.com) **Ph: 518-810-2213**

**PayPal:** [showoffequine@gmail.com](mailto:showoffequine@gmail.com) **Venmo:** @Stacy-Anatriello **We now accept credit cards!!** Service fee will be applied