Entries must be received by May 10th to avoid late fee.
INCLUDE COPY OF NEGATIVE COGGINS
Checks must accompany all entries to avoid late fee.
Mail entries along with checks payable to PHJA to:
122 Dobbin Lane; Mooresville, NC 28117

PIEDMONT HUNTER JUMPER ASSOCIATION
MID YEAR HORSE SHOW
May 14 - 16, 2010
Sedgefield Show Grounds - Greensboro, NC

Only one owner per form. Copies of negative coggins test for all horses entered are required. Every horse on the grounds, showing or not, must be officially entered with an entry form.

office use	HUNTERS & JUMPERS-HORSE NAME class numbers go under name	1st/2nd yr Green	PONY S, M, L	OWNER'S NAME	RIDER'S NAME	AGE	ENTRY FEE
office use	EQUITATION-HORSE NAME class numbers go under name	1st/2nd yr Green	PONY S, M, L	OWNER'S NAME	RIDER'S NAME	AGE	ENTRY FEE

I AGREE THAT AS AN ENTRY, I AM FULLY AWARE THAT HORSE SPORTS AND THE COMPETITION INVOLVE INHERENT DANGEROUS RISK OF SERIOUS INJURY OR DEATH, AND BY PARTICIPATING THE UNDERSIGNED EXPRESSLY ASSUME ANY AND ALL RISKS OF INJURY OR LOSS, AND THEY AGREE TO INDEMNIFY AND HOLD THE PHJA, THE COMPETITION, AND THEIR OFFICIAL, DIRECTORS, EMPLOYEES AND AGENTS HARMLESS FROM AND AGAINST ALL CLAIMS INCLUDING FOR ANY INJURY OR LOSS SUFFERED IN CONNECTION WITH SAID COMPETITION. THE CONSTRUCTION AND APPLICATION OF PHJA RULES ARE GOVERNED BY THE STATE OF NORTH CAROLINA, AND ANY ACTION INSTITUTED AGAINST THE PHJA MUST BE FILED IN NORTH CAROLINA

"I further agree that if any damage shall be occasioned or loss occur, by fire or otherwise, to the horses exhibited, or to any vehicle or other article that I may send with such horses that I will make no claim therefore; and I further agree to hold this Show harmless from any claim or demand of whatsoever that may be occasioned by the horse or horses exhibited by me, the negligence of the persons in charge of such horses, and to repay the Show, on demand, all damages it may sustain by reason of any claim or demand as aforesaid."

SUBTOTAL	
Late Fee (if received after 5/10) @ $25	
Stabling @ $65/weekend	
Shavings ____ bags	
Grounds Fee @ $25/non-stabled horse	
Non-Showing Fee @ $10/day/horse	
Office Fee @ $15/entry	
TOTAL DUE	

Owner's Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
X _____
Owner's or Agent's Signature Required

Trainer's Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
X _____
Trainer's Signature Required

Rider's Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
X _____
Signature Required (if under 18 parent/guardian must sign)