

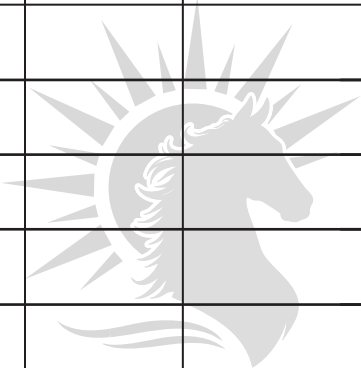
OSHKOSH SUMMER CLASSIC

ONE OWNER PER ENTRY BLANK

ENCLOSE A COPY OF HEALTH CERTIFICATE AND NEGATIVE COGGINS, PROOF OF RHINO/FLU VACCINATION WITHIN 6 MONTHS OF ENTERING STABLES. A CHECK OR CREDIT CARD NUMBER MUST BE INCLUDED WITH ENTRIES. NO ENTRIES WILL BE PROCESSED UNTIL PAYMENT METHOD IS RECEIVED. NO REFUNDS ON STALL OR OFFICE FEES. PLEASE COMPLETE BOTH SIDES OF THIS FORM. SIGNATURES ARE REQUIRED.

OWNER'S NAME: _____ **STALLS AVAILABLE MONDAY**

OFFICE USE	NAME OF HORSE	AGE	COLOR	SEX	HORSE REG NUM	RIDER/DRIVER	CLASS	FEE	CLASS	FEE	CLASS	FEE	TOTAL FEES



FOR HORSE SHOW OFFICE USE:

CHECK # _____ CHECK AMOUNT: _____

BACK NUMBER: _____ NOTES: _____

MAKE CHECKS PAYABLE TO: OSHKOSH SUMMER CLASSIC

MAIL ENTRIES TO: KRISTEN PETTRY
 PO BOX 4180, BARRINGTON, IL 60011
 KRISTENPETTRY@GMAIL.COM | 815-347-4395
 EMAIL OR TEXT PREFERRED

ENTRIES CLOSE JUNE 8

STABLE WITH: _____

ARRIVAL DATE: _____

LOCAL HOTEL: _____

- # _____ REGULAR/ACADEMY CLASS FEE - \$50 \$ _____
 - # _____ REGULAR/ACADEMY CHAMPIONSHIP FEE - \$75 \$ _____
 - # _____ BOX STALL \$175 \$ _____
 - # _____ TACK STALL \$175 \$ _____
 - # _____ EQUINE SPORTS COUNCIL FEE PER HORSE \$15 OR ACADEMY RIDER \$5 ... \$ _____
 - # _____ OFFICE FEE/PER RIDER \$35 \$ _____
 - # _____ POST ENTRY FEE/PER HORSE \$50 \$ _____
 - # _____ RINGSIDE TABLE (SEATS 8) \$300 (\$350 AT SHOW) \$ _____
 - # _____ CAMPER HOOKUP \$50 EACH \$ _____
- TOTAL FEES:** \$ _____

QUALITY FEED AND BEDDING
 920-866-2459 OR 920-362-1054

SHAVINGS: _____ HAY: _____

GRAIN: _____ BOARDS: _____



OSHKOSH SUMMER CLASSIC

SIGNATURES REQUIRED IN THREE (3) PLACES (AT X) BELOW
Entries Not Signed Will Not Be Accepted * Carefully Read This Agreement Before Signing

EVERY ENTRY AT A SHOW THAT PAYS THE EQUINE SPORTS COUNCIL EXHIBITION AND/OR DRUG FEES AND IS EXHIBITED AND JUDGED ACCORDING TO THE ESC RULES AND GUIDELINES SHALL CONSTITUTE AN AGREEMENT AND AFFIRMATION THAT: (1) THE OWNER, AGENT, LESSEE, TRAINER, MANAGER, COACH, DRIVER AND RIDER AND ANY OF HIS/HER REPRESENTATIVES ARE BOUND BY THE SHOW RULES; (2) THAT EVERY HORSE, RIDER, AND/OR DRIVER IS ELIGIBLE AS ENTERED, INCLUDING AMATEUR OR PROFESSIONAL STATUS; (3) THEY AGREE TO ACCEPT AS FINAL THE DECISION OF SHOW MANAGEMENT ON ANY QUESTION ARISING UNDER SAID RULES, AND AGREE TO HOLD THE SHOW, EQUINE SPORTS COUNCIL, THEIR OFFICIALS, DIRECTORS, AND EMPLOYEES HARMLESS FOR ANY ACTION TAKEN; (4) THAT THE OWNER, RIDER/DRIVER AND ANY OF THEIR AGENTS OR REPRESENTATIVES AGREE TO HOLD THE SHOW, EQUINE SPORTS COUNCIL, AND THEIR OFFICIALS, DIRECTORS, EMPLOYEES AND AGENTS HARMLESS FOR ANY INJURY OR LOSS SUFFERED DURING OR IN CONJUNCTION WITH THE SHOW, WHETHER OR NOT SUCH INJURY OR LOSS RESULTED DIRECTLY OR INDIRECTLY FROM THE NEGLIGENT ACTS OR OMISSIONS OF SAID OFFICIALS, DIRECTORS, EMPLOYEES OR AGENTS OF THE SHOW OR EQUINE SPORTS COUNCIL.

BY SIGNING BELOW, I AGREE TO BE BOUND BY ALL APPLICABLE RULES AND ALL TERMS AND PROVISIONS OF THIS ENTRY BLANK.

X

TRAINER SIGNATURE

TRAINER: _____

ADDRESS: _____

ADDRESS: _____

TRAINER PHONE: _____

TRAINER EMAIL: _____

TRAINER ASHBA # _____

TRAINER UPHA # _____

TRAINER AHHS # _____

X

RIDER SIGNATURE

RIDER: _____

ADDRESS: _____

ADDRESS: _____

RIDER PHONE: _____

RIDER EMAIL: _____

RIDER ASHBA # _____

RIDER UPHA # _____

RIDER AHHS # _____

X

OWNER SIGNATURE

OWNER: _____

ADDRESS: _____

ADDRESS: _____

OWNER PHONE: _____

OWNER EMAIL: _____

OWNER ASHBA # _____

OWNER UPHA # _____

OWNER AHHS # _____

Parent/Guardian Signature: (Required if Rider/Driver is a minor)

Print Parent/Guardian Name

Emergency Contact Phone Number