

Palm Beach County Mounted Posse H/J SHOW Office form – to be entered along with class cards

Back # _____ One Horse/Rider combination per entry form - **PLEASE PRINT CLEARLY**

Rider Name _____ Horse Name _____

Barn Affiliation/Trainer _____

CLASSES (circle):

74	82	90	98	106	114	122	130
75	83	91	99	107	115	123	131
76	84	92	100	108	116	124	132
77	85	93	101	109	117	125	133
78	86	94	102	110	118	126	134
79	87	95	103	111	119	127	135
80	88	96	104	112	120	128	136
81	89	97	105	113	121	129	137

TOTAL: _____

WARNING: Under Federal Law, an equine activity sponsor or equine professional is not liable for any injury to, or death of, a participant in equine activities resulting from the inherent risk of equine activities.
 –Senate Bill 1658. Section 91.1A

Office Use Only:			
Class Total:	_____ x	\$10.00	\$ _____
Jackpot Total:	_____ x	\$15.00	\$ _____
Schooling:	_____ x	\$10.00	\$ _____
Stall: # _____	_____ x	\$40.00	\$ _____
Shavings:	_____ x	\$7.00	\$ _____
Back Number:	_____ x	\$1.00	\$ _____
Office/EMT Fee:		\$5.00	\$ _____ 5.00
Membership:		\$30.00	\$ _____
Family Membership:		\$40.00	\$ _____
Non-Competing Horse Fee:		\$15.00	\$ _____
Credit Card Fee:	_____ x	\$3.00	\$ _____
Total # Show Credits:	_____		– _____
CC# _____			
CASH/CHECK # _____		TOTAL	\$ _____

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