

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 \_\_\_\_\_ Responsible Party \_\_\_\_\_

**CIRCLE CLASS #:**

74	83	92	101	110	119	128	137
75	84	93	102	111	120	129	<b>138</b>
76	85	94	103	112	121	130	
77	86	95	104	113	122	131	
78	87	96	105	114	123	132	
79	88	97	106	115	124	133	
80	89	98	107	116	125	134	
81	90	99	108	117	126	<b>135</b>	
82	91	100	109	118	127	136	

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:

<b>Class Total:</b>	_____	x	<b>\$12.00</b>	\$	_____
<b>Jackpot Total: (135,138)</b>	_____	x	<b>\$15.00</b>	\$	_____
<b>Schooling:</b>	_____	x	<b>\$10.00</b>	\$	_____
<b>Stall: #</b>	_____	x	<b>\$40.00</b>	\$	_____
<b>Shavings:</b>	_____	x	<b>\$7.00</b>	\$	_____
<b>Back Number:</b>	_____	x	<b>\$1.00</b>	\$	_____
<b>Replacement Number:</b>	_____	x	<b>\$2.00</b>	\$	_____
<b>Office/EMT Fee:</b>			<b>\$5.00</b>	\$	<b>5.00</b>
<b>Membership:</b>			<b>\$30.00</b>	\$	_____
<b>Family Membership:</b>			<b>\$40.00</b>	\$	_____
<b>Non-Competing Horse Fee:</b>	_____		<b>\$15.00</b>	\$	_____
<b>Credit Card 4% Processing Fee:</b>				\$	_____
<b>Total # Show Credits:</b>	_____			-	_____
<b>CC#</b>	_____				
<b>CASH/CHECK #</b>	_____		<b>TOTAL</b>	\$	_____