

# West Tennessee Pony Club Hunter/Jumper Show Entry Form – Sept 25 & 26, 2009

**Section 1: Responsible Person:** *List the name and address of the person responsible for payment of all fees for the riders/horses registered below:*

Name: \_\_\_\_\_ Telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Address: \_\_\_\_\_ City, State & Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ *By providing your e-mail address we can send you important information about the show.*

I hereby waive and release any and all claims of action I might have or could assert against the *WEST TENNESSEE PONY CLUB*, its officers, the organizers and show personnel, its members and agents, and the *CHARITY HORSE SHOW ASSOCIATION, INC.*, its management, employees or other agents, due to theft, illness, injury, death of the horse(s), or any other occurrence, which may arise to me, my horse(s), or equipment for any reason whatsoever during the stay of the horse(s) listed above. It is understood that I am entering this contract voluntarily at my own risk, and I am fully aware of the terms listed above, and assume any and all liability for my actions. If I am not the owner of the horse(s) listed above, my signature affirms that I have the authority of the owner to execute this release on behalf of the owner.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Relationship to Rider(s): \_\_\_\_\_  
 (Parent or Guardian if minor)

**Section 2: Rider(s):** *Please PRINT the name(s) of all riders that the above person is responsible for:*

Rider A: \_\_\_\_\_ Birth Date: \_\_\_\_\_ or [ ] Adult

Rider B: \_\_\_\_\_ Birth Date: \_\_\_\_\_ or [ ] Adult

Rider C: \_\_\_\_\_ Birth Date: \_\_\_\_\_ or [ ] Adult

**Barn Affiliation/Trainer** \_\_\_\_\_

**Section 3: Horse(s):** *Please PRINT the name(s) of all horses that will be ridden:*

Horse 1: \_\_\_\_\_ Description: \_\_\_\_\_

Grounds Fee (\$25): \$ \_\_\_\_\_ or  Stall (\$50) \$ \_\_\_\_\_ Shavings: # \_\_\_\_\_ @ \$6 /bale \$ \_\_\_\_\_

Horse 2: \_\_\_\_\_ Description: \_\_\_\_\_

Grounds Fee (\$25): \$ \_\_\_\_\_ or  Stall (\$50) \$ \_\_\_\_\_ Shavings: # \_\_\_\_\_ @ \$6 /bale \$ \_\_\_\_\_

Horse 3: \_\_\_\_\_ Description: \_\_\_\_\_

Grounds Fee (\$25): \$ \_\_\_\_\_ or  Stall (\$50) \$ \_\_\_\_\_ Shavings: # \_\_\_\_\_ @ \$6 /bale \$ \_\_\_\_\_

CHECK HERE to reserve a **TACK STALL** and add \$50 to your fees below.

**EACH HORSE MUST PAY EITHER A STALL FEE OR A GROUNDS FEE**

**One Year Negative Coggins Required – NO EXCEPTIONS!** Please mail a copy with your entries.

**Sharing of Horses:** If two or more riders are sharing a horse please designate one person to be the "Responsible Person" for that horse and be responsible for paying all fees for that horse. Please submit entries for shared horses together.

**Section 4: Classes Entered:** *Each HORSE & RIDER combination will be assigned an entry number. Please use one line for each Rider (Section 2 - A, B, C) and Horse (Section 3 - 1,2,3) combination to indicate the classes to be ridden.*

**\$15 per Class or \$40 per Hunter Division (If entering a Division please list Division Letter)**

Rider \_\_\_\_\_ Horse: \_\_\_\_\_ Classes Entered: \_\_\_\_\_

Rider \_\_\_\_\_ Horse: \_\_\_\_\_ Classes Entered: \_\_\_\_\_

Rider \_\_\_\_\_ Horse: \_\_\_\_\_ Classes Entered: \_\_\_\_\_

Rider \_\_\_\_\_ Horse: \_\_\_\_\_ Classes Entered: \_\_\_\_\_

**Section 5: FEES:** *Please calculate fees due for entries listed above: No Entries Accepted Without Fees or an Open Check*

*Check all that apply and attach Addendum:*

**Mail or Drop Off Advance Entries to:**

Dana Kamp, Show Secretary  
 2232 Dogwood Oaks Drive  
 Germantown, TN 38139-5301

**Questions:**

E-Mail: meyer2@comcast.net

Telephone: (901) 569-0739

Forms & Updates: <http://wtm.ponyclub.org>

Sharing Horse:     Splitting Tack Stall:     Special

Office & Medic Fee - Per Rider: \_\_\_\_\_ x \$15 \$ \_\_\_\_\_

Total Number of Grounds Fees: \_\_\_\_\_ x \$25 \$ \_\_\_\_\_

Total Number of Stalls: \_\_\_\_\_ x \$50 \$ \_\_\_\_\_

Total Bales of Shavings: \_\_\_\_\_ x \$ 6 \$ \_\_\_\_\_

Total Number of Tack Stalls: \_\_\_\_\_ x \$50 \$ \_\_\_\_\_

Number of Classes (not in Division) Entered: \_\_\_\_\_ x \$15 \$ \_\_\_\_\_

Number of Hunter Divisions Entered: \_\_\_\_\_ x \$40 \$ \_\_\_\_\_

**TOTAL FEES DUE:** \$ \_\_\_\_\_

Make checks payable to **West Tennessee Pony Club** or just **WTPC**

**WARNING:** Under Tennessee Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Tennessee Code Annotated, title 44, chapter 20.