

PRE-ENTRY

LBHA HORSESHOW PRE ENTRY FORM

IF MAILED SEND TO :
LBHA P.O. BOX 2326
LOOMIS CA 95650

FORM MUST BE RECEIVED BY LBHA THE
THURSDAY BEFORE THE SHOW WEEKEND

OPEN CHECK # _____

WHICH SHOW: _____

YEAR _____

LBHA MEMBER

4-H MEMBER

Group _____

Age if under 18 _____

RIDER NAME: _____

ADDRESS: _____

CITY: _____

STATE _____ ZIP CODE: _____

PHONE: _____ E-MAIL: _____

For office Use Only

Pre-entered riders may purchase more gate passes through out the day at the same pre-entry price of \$4.50

One Form Per Show - one rider per form - multiple horses

	HORSE NAME	(LBHA To Fill In HS #)	NUMBER PASSES	Cost Per PASS	Amount
1:					
2:					
3:					
4:					
5:					

To Be Filled out By Show Staff

TOTAL PASSES _____

Donations, Other _____

Memberships (Type) _____

Sponsorships (Type) _____

Total Cash _____ Total Checks _____

Total for Show _____

GATE PASS START TOTAL: _____

GATE PASS INFORMATION

GATE PASSES -START _____

ADDED PASSES _____ HS# _____

ADDED PASSES _____ HS# _____

ADDED PASSES _____ HS# _____

ADDED PASSES _____ HS# _____

TOTAL SHOW PASSES _____ AT \$4.50

AMOUNT PAID _____

Affidavit: I hereby certify that the above named horse(s)/rider are eligible as entered. I agree to hold harmless the Loomis Basin Horsemen's Association, Placer County, and those connected with the horse show, against any claim for injury to myself, my horse, or my property, whether or not such claim might be based on negligence.

I agree to the form of this contract including the indemnity provisions there in. Helmets are strongly recommended for all youths 18 and under in both Western & English classes. We value our youngsters and want to keep them safe. I understand there is a \$20 charge for returned checks.

Ehaibitor/Rider Signiture: _____

TODAYS DATE: _____

Parent/Guardian's Signiture if exhibitor is under 18 & relationship to exhibitor _____