Grandview Farms

Please email entry to Melissa@grandviewfarms.us

Name:_____ **Junior Age:**_____ **Ad:** ____

Address:_____ **City:**_____

State/Zip:_____ **Phone:** _____

Email Address:_____

Trainer/Farm:_____

SJHSA Member: Yes / No   Applying Today: Yes / No

	RIDER #	HORSE NAME	HORSE OWNER	CLASSES ENTERED
Saturday:				
Sunday:				

Coggins #:_____ **Date:** _____ **Lab:** _____

WARNING:
Under Texas Law (Chapter 87, Civil Practices and Remedies Code), 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. As a condition of entry and the right to enter the show grounds, SJHSA, Robin Rhodes, Stone Hollow Stables, Melissa Snyder, Grandview Farms, and their employees, judges, and volunteers, may not in any way be held liable or responsible for any lost, stolen, or damaged articles or animals, nor liable for any injury or death sustained by any participant, spectator, volunteer, or animal.

Participant's Signature_____**Date:**_____

If the Participant is a Minor:
I have read the above condition and do hereby consent and agree that the above named participant may participate in the Show.

Parent/Guardian Signature_____**Date:**_____

To be completed by Show Secretary:

Saturday: _____Classes X $15ea =   _____

Sunday: _____Classes X $15ea =   _____

Stall Fee: _____ @ $_____ =   _____

 __Weekend Stall: $80

 __Overnight Stall: $60

 __Day Stall: $50

Shavings: _____ @ $10/load   =   _____

Office Fee: __1__ @ $10ea =   __$10__

Total Amount Due = $_____

***Make Checks Payable to:

GRANDVIEW FARMS

Cash -or- **Check**

Amount: $_____

Check # _____

Additional Notes: