

Entries Due: March 20th Please Print

Contact Person		
Name of Farm		
Mailing Address		
City	State	Zip
()		
Phone #		
E-Mail Address		
Please Stall with:		

If you do not attend the show after sending your entries in you will be responsible for stall fees, office fees, and shavings ordered.

OBMHC – Spring Extravaganza AMHA	Wednesday	Fee	x	#	Total			
Office Fee – Non-Refundable Per Horse - Per Regi	\$ 10.00	х						
AMHA Fee – Non-Refundable Per Horse - Per Reg	\$ 5.00	х						
Youth Classes (MUST be designated Youth Class	\$ 25.00	х						
Adult – Amateur – COOL Classes	\$ 30.00	х						
Open – Stakes Classes	\$ 35.00	Х						
Unlimited classes per horse per registration be current OBMHC Member (Membership must with Entries) OBMHC Member = Owner of Horse	\$150.00	х						
Stall Fee is paid 1 time for 1 or <u>ALL</u> shows	7 & 8	9	10 & 1	1 12				
Please mark what days you're sho								
Stalls – Sunday – Sunday <u>Includes 2 bales of</u> (Limit 2 horses per stall)	\$ 90.00	х						
Early Arrival Stalls — Prior to 10:00 a.m. on Sunda (Limit 2 horses per stall)	\$ 15.00	х						
Shavings – MUST Pre-order – Non-Refundable	\$ 7.00	х						
Camping	# of Nights		Х	\$30.00				
LATE FEE – Per Horse – Per Registry – Per Sh Entries Received AFTER March 20 th	\$ 50.00	х						
PayPal: Obmhc2019@gmail.com PayPal		Х	1.05					
(MUST complete CC authorization form) Credit Card		X	1.05					
	TOTAL DUE:							
Make checks to: OBMHC MUST Have a Blank Check or Credit Card on File to get back #'s Mail entries to: Lisa Leonard, 2900 Russell Rd. Utica, KY 42376 Email entries to: mini34@mindspring.com Facebook Messenger entries to: Lisa Leonard								
Did you enclose a COPY of the following: Registration Paper / Lease Information Stallion Verification Copy of Amateur &/or Youth Cards	on Verification Date Received: Amount Enclosed: \$							
Entry Form Signed & Completed		5						



OBMHC Spring Extravaganza AMHA

<u>Wednesday</u>



Must enclose a copy of registration papers, amateur and youth cards lease information, stallion verification form.

Show No. (Office Use)	Name of Horse	Exhibitor Name (s)	Class Number (One class number per box)					Reg. No.	Date of Birth	Sex	Height (Office Use)	Registered Owne and City & S
		1)										
		2)						_				
		1)										
		2)						_				
		1)										
		2)						_				
		1)										
		2)						_				
		1)										
		2)						_				
		1)										
		2)						-				
enter these ho parmless the	nust be signed to participate in borses in the classes listed above. By manager, show staff, AMHA, and sport of that I have read, understand and	so entering, I agree to abide by onsors of the show from all liabili	and be ty in cas	bound b	y all ru cident, t	les and theft, inj	regulations of A uries or loss in a	MHA, Southeas any way associa	tern Arei ted with	na, ŌBI	MHC. I agre	ee to hold
Sign	ature of Amateur	Signature of Amateur		-	Signa	ature of	Youth		Signatu	re of Y	outh ′	
Amateur #:	teur #:	Amateur #:							Youth _			
					Youtl	h Birth	Date		Youth E	Birth Da	ate	