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Please Print

Name of Farm	- [
	:
Contact Person	- (
Mailing Address	-
City State Zip	_
()	_
Phone #	
E-Mail Address	-
Please Stall with:	_
Once your entries have been received and for any unknow r you decide NOT to attend the show you will be responsible j following fees: Office, Stall & Shavings. If using Credit Card you will be responsible for the Car	for the
Square Pay (k) VISA (k) TESA (k) TESA	SC VER

<u>Entries Due – May 15th</u>	Fee	x	#	Total				
Office Fee – Non-Refundable Per Horse - Per Reg	\$ 10.00	Х						
LATE FEE – Per Horse - Entries Received AFTER May	\$ 25.00	Х						
Youth Class Entry Fee	\$ 15.00	х						
Amateur	\$ 25.00	Х						
Adult – Open & Stakes Class Fees	\$ 30.00	Х						
Unlimited classes per horse per registration div	\$160.00	Х						
Stalls – Friday noon – Sunday Afternoon (2 horses per	\$ 40.00	Х						
Stalls – Layover – Sunday Night	\$ 15.00	Х						
Shavings – MUST Pre-order – Non-Refundable	\$ 8.00	Х						
Showing from Trailer Fee per equine Per Day	\$ 15.00	Х						
Camping (If plugged in to electric, dump station located grounds)	\$ 25.00 per night	х						
Exhibitor Meal (Saturday Evening) PLEASE indicate # attending	FREE	х						
Class Sponsorship \$10.00 per class or 6 classes for Deadline April 25 th to be printed in program boo								
Make checks to: Bluegrass Miniature Horse Club	Total Due: \$							
Pay with Credit Card: Pay at show or can send invoice (Must pay extra fee)								
Mail entries to: Lisa Leonard, 2900 Russell Rd. Utica, KY 42376								
Email entries to: <u>mini34@mindspring.com</u> Facebook Messenger entries to: Lisa Leonard								
Did you enclose a COPY of the following:	For Office Use Only:							
Registration Paper	Date Received:							
Both Sides of Perm. Measurement Card	Amount Enclosed:\$							
Copy of Amateur &/or Youth Cards	Check #:							
Entry Form Signed & Completed	С	redit Card Amount: _\$						
Check or Money Order	Due: \$							



Must enclose a copy of registration papers, amateur and youth cards and a copy of measurement card if measured in 2025.

Show No. (Office Use)	Name of Horse	Exhibitor Name (s)	Class Number (One class number per box)						Date of Birth	Sex	Height (Office Use)	Registered Owners Names and City & State						
		1)																
		2)																
		1)																
		2)																
		1)																
	2)	2)																
		1)																
		2)																
		1)																
		2)																
		1)																
		2)																

This form must be signed in order to participate in the show. I hereby enter these horses in the classes listed above. By so entering, I agree to abide by and be bound by all rules and regulations of the Central KY Ag & Expo Center and BMHC. I agree to hold harmless the managers/staff and sponsors of the show from all liability in case of accident, theft, injuries or loss in any way associated with my participation in this event. MY signature is proof that I have read, understand, and agree to accept this statement.

Signature of Exhibitor

Signature of Exhibitor

Signature of Parent or Legal Guardian

I certify that I am an amateur or youth as recognized by the rules of the AMHR – ASPC – ASPR.