

**Palm Beach County Horseman's Association – Entry Form**

Date: \_\_\_\_\_

Back # \_\_\_\_\_

HORSE NAME \_\_\_\_\_

Owner's Name \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

Trainer/Barn Name \_\_\_\_\_

Phone: \_\_\_\_\_

Stall Reservations are REQUIRED – 561-248-3647

E-Mail: \_\_\_\_\_

**OWNER, RIDER, AND TRAINER MUST BE MEMBERS AND ALL HORSES MUST BE RECORDED. FOUR SHOW MINIMUM APPLIES FOR YEAR END AWARDS. SEE RULES FOR FULL DETAILS.**

Rider's Name \_\_\_\_\_

Class #

Saturday	_____	_____	_____	_____
	_____	_____	_____	_____
Sunday	_____	_____	_____	_____
	_____	_____	_____	_____

Fees:		
Single Membership	\$60.00	\$ _____
Family Membership	\$80.00	\$ _____
Medic Fee (Includes Friday Schooling)		\$30.00
Office Fee		\$30.00
Stall (if Split, _____)	\$80.00	\$ _____
Tack Stall (if Split, _____)	\$80.00	\$ _____
Stall Watch	\$5.00/day	\$ _____
Shavings # _____	\$9.00	\$ _____
Grounds Fee (if no stall)	\$40.00	\$ _____
Saturday/Sunday Schooling	\$20.00/day	\$ _____
Flat Rate Schooling	\$150.00	\$ _____
<b>Post Entry Fee</b>	\$25.00	\$ _____

Total \$ \_\_\_\_\_

**WARNING: Under Florida Law, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risk of equine activities. The exhibitor or owner is responsible for collection costs and/or attorney's fees on past due balances.**

I have read and understand the above and agree to abide by it.

If under 18 years, Parent must sign:

Rider Signature: \_\_\_\_\_