

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	\$50.00	\$ _____
Family Membership	\$75.00	\$ _____
Medic Fee (Includes Friday Schooling)	\$25.00	\$ _____
Office Fee	\$30.00	\$ _____
Stall (if Split, _____)	\$75.00	\$ _____
Tack Stall (if Split, _____)	\$75.00	\$ _____
Stall Watch	\$5.00/day	\$ _____
Shavings # _____	\$9.00	\$ _____
Grounds Fee (if no stall)	\$30.00	\$ _____
Saturday/Sunday Schooling	\$20.00/day	\$ _____
Flat Rate Schooling	\$125.00	\$ _____
Paper Entry Fee	\$10.00	\$ _____

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: _____