

Owner: _____

Address: _____

City/State/Zip: _____

Phone#: _____

ASHA #: _____ AHHS #: _____ UPHA #: _____

Trainer: _____

Address: _____

City/State/Zip: _____

Phone #: _____

ASHA #: _____ AHHS #: _____ UPHA #: _____

CONDITION OF ENTRY

By signing this form, I certify that I have received and read the contents of the Premium Book and that I will abide by all applicable rules contained therein, including rules relating to the administration of drugs to animals and all other rules relating to the Wisconsin Futurity Horse Festival and the laws and regulations of the State of Wisconsin.

SIGNED: _____ DATE: _____

Exhibitor

SIGNED: _____ DATE: _____

Parent and/or Guardian

Owner or Owner's Agent Signature

Address

City State Zip Code

Telephone Date

Rider/Driver/Handler: _____

Address: _____

City/State/Zip: _____

Phone#: _____

ASHA #: _____ AHHS #: _____ UPHA #: _____

Make Checks Payable To: _____

Address: _____

City/State/Zip: _____

Social Security/Tax ID: _____

Total Entry Fees \$ _____

Horse Stalls @ \$130 \$ _____

Tack Stalls @ \$130 \$ _____

Office Fee @ \$30/Horse (Mandatory) \$ _____

Ringside Box Seats @ \$300 (Seats 12) \$ _____

Banner Sponsorship @ \$300 \$ _____

Post Entries @ \$25/Entry (after September 1st) \$ _____

TOTAL CHARGES \$ _____

MAKE CHECKS PAYABLE TO:

WISCONSIN FUTURITY HORSE FESTIVAL

MAIL ENTRIES TO:

WISCONSIN FUTURITY HORSE FESTIVAL

LIZ HOLMES

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Mebane, NC 27302

Phone: 919-672-3741

Email: lizholmes1957@gmail.com

STALLS AVAILABLE: Tuesday September 18th, 2018