

# Entry Form

## Easter Celebration AMHR SHOW April 8-9<sup>th</sup>, 2023.

World equestrian Center Ocala, FL

Postmarked by March 21 or emailed March 28, 2023

Farm Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone &

Email \_\_\_\_\_

I certify that I am a Youth or Amateur as required by the Rules of AMHR. Name and date of birth

1 \_\_\_\_\_ AMHR# \_\_\_\_\_

2 \_\_\_\_\_ AMHR # \_\_\_\_\_

3 \_\_\_\_\_ AMHR # \_\_\_\_\_

4 \_\_\_\_\_ AMHR # \_\_\_\_\_

Youth Must provide Date of Birth – Age group determined by Age on January 1<sup>st</sup> of current year.

I hereby enter miniature horse(s)/pony(s) in the classes below. In entering the horse(s)/pony(s) in participation in such events and in making use of property privileges, I will abide and be bound by all rules and regulations. I hereby hold harmless the show manager, show secretary, show organizers, WEC, sponsors or sponsor management from any loss, damage or injury to any person or property resulting from such entry, participation or use of such property or privileges. Youth under 17 must wear a helmet while driving. THIS SHALL BE A CONDITION OF ENTRY to this show or show grounds. WARNING ALL PARTIPANTS agree that the equine activity sponsor and/or equine professional(s) of this event are not liable for injury to, or the death of, a participant in this equine event resulting from the inherent risks of equine activities.

Exhibitor Signatures: \_\_\_\_\_

Parent or Guardian (for Youth Exhibitor) \_\_\_\_\_

**Must be signed before Participation.**

Multiple horses can be added on this page.

Registered Name of Horse 1	Reg. Number AMHR	Sex	DOB	Registered Owner	Number (office)	Height (office)

Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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Registered Name of Horse 2	Reg. Number AMHR	Sex	DOB	Registered Owner	Number (office)	Height (office)

Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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Registered Name of Horse 3	Reg. Number AMHR	Sex	DOB	Registered Owner	Number (office)	Height (office)

Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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Classes (in boxes below) & Exhibitor: \_\_\_\_\_

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**THIS FORM MAY BE REPRODUCED**

This show is approved by and conducted under the rules of the AMHR, Morton, Illinois. All entered horses must be registered with AMHR. Youth/Amateur Exhibitors must provide their Current (2023) AMHR Youth/Amateur number in the space provided on the front of the entry form.

Please use this form for all three shows.

The following must be enclosed with submitted entries:

1. Copy of each horse's Registration Papers: front & back
  2. Copy of Current (2023) Youth/Amateur Card
  3. Coggins Certificate (within one year)
  4. EHV-1 & EHV-4 vaccine proof (within 6 months)
  5. Check for monies due at the show. Make checks payable to **OBMHC or PayPal: [Obmhc2019@gmail.com](mailto:Obmhc2019@gmail.com)** (exhibitor is responsible for fees)
- Health certificate: due at check-in

ENTRIES ARE TO BE SENT TO: Shari Morris at [smorris@wheatonma.edu](mailto:smorris@wheatonma.edu) 501 Bird Rd Mansfield, MA 02048

**Postmarked by March 21 or Emailed March 28, 2023**

**COMPLETE THE FOLLOWING**

**ENTRIES AND STALLS**

Open, Amateur & Adult Special Needs Classes \_\_\_\_\_ @ \$30.00 per Class \$ \_\_\_\_\_

Open, Amateur & Adult Special Needs OBMHC members Classes \_\_\_\_\_ @ \$25.00 per Class \$ \_\_\_\_\_

Youth Classes \_\_\_\_\_ @ \$20.00 per Class \$ \_\_\_\_\_

Youth OBMHC members Classes \_\_\_\_\_ @ \$15.00 per Class \$ \_\_\_\_\_

Flat fee OBMHC members only pre-entry only \_\_\_\_\_ @ \$125.00 per Class \$ \_\_\_\_\_

Flat fee is 10 classes/horse.

Late entry \_\_\_\_\_ @ \$5.00 per Class \$ \_\_\_\_\_

If not postmarked by March 21 or emailed by March 28, 2023.

STALLS \_\_\_\_\_ @ \$100 Thursday -Sunday \$ \_\_\_\_\_

Shavings must be purchased here: <https://worldequestriancenter.jotform.com/223222771406146>

Tack STALLS \_\_\_\_\_ @ \$100 Thursday -Sunday \$ \_\_\_\_\_

WEC horse fee \_\_\_\_\_ @ \$5/horse \$ \_\_\_\_\_

RV HOOKUP \_\_\_\_\_ @ \$85.00/night \$ \_\_\_\_\_

OFFICE FEE: \_\_\_\_\_ # horses X \_\_\_\_\_ # shows \_\_\_\_\_ @ \$ 10.00 per horse/show \$ \_\_\_\_\_

AMHA fee \_\_\_\_\_ @ \$3/horse \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Make Checks Payable to: OBMHC or PayPal: [Obmhc2019@gmail.com](mailto:Obmhc2019@gmail.com) (exhibitor is responsible for fees)

Mail Entries: Shari Morris 501 Bird Rd Mansfield, MA 02048

Email entries: [smorris@wheatonma.edu](mailto:smorris@wheatonma.edu)

I plan to arrive (Date and approximate time): \_\_\_\_\_

In case of an emergency, I can be reached at (phone) \_\_\_\_\_ Hotel/Room \_\_\_\_\_

Please stall me with/near: \_\_\_\_\_

Please note any special requests here: \_\_\_\_\_

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