

2024 AMERICAN SADDLE HORSE BREEDERS FUTURITY OF KANSAS AND OKLAHOMA ENTRY FORM

At Salina Charity Horse Show October 18-20, 2024

Mail Entries to: Yvonne McCarthy, 8601 E 55th St S, DERBY KS 67037

Checks to cover ALL FEES must accompany entries

| ENTRY # | NAME OF HORSE | | | | Total Entry | Breed Reg. # | EXHIBITOR NAME | ONE OWNER PER ENTRY BLANK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|----------------------------------|--|--|--|-------------|--|-------------------|--|-------------------------------|------|--|-----------------------------|------|--|------------------------------------|------|--|--------------|-----|--|------------|-----|--|---------------------|------|--|-------------------------------|--|--|------------------|--|--|--|--|--|--|--|
| | Class numbers below horse's name | | | | Fees | | Exhibitor Address | Owner Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | Street | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | City | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | State | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | Phone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | STABLE WITH (must appear on both entry blanks) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: 1px solid black;">Stall Fee</td> <td style="width: 10%; text-align: right;">\$50</td> <td style="width: 60%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Jump Out Fee per horse</td> <td style="text-align: right;">\$20</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Office Fee per horse</td> <td style="text-align: right;">\$30</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Electric Hookup, Barn 1, per night</td> <td style="text-align: right;">\$10</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Bag Shavings</td> <td style="text-align: right;">\$8</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Bale Straw</td> <td style="text-align: right;">\$6</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Horse Show T-shirts</td> <td style="text-align: right;">\$15</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Specify Quantity & Size _____</td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: right;">TOTAL DUE</td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table> | | | | | | Stall Fee | \$50 | | Jump Out Fee per horse | \$20 | | Office Fee per horse | \$30 | | Electric Hookup, Barn 1, per night | \$10 | | Bag Shavings | \$8 | | Bale Straw | \$6 | | Horse Show T-shirts | \$15 | | Specify Quantity & Size _____ | | | TOTAL DUE | | | BILL ENTRIES AND SEND PAYBACK TO: | | | STALLS WILL BE OPEN Thurs. Oct. 17 at 12:00 NOON unless special arrangements are made with show | |
| Stall Fee | \$50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Jump Out Fee per horse | \$20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office Fee per horse | \$30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Electric Hookup, Barn 1, per night | \$10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bag Shavings | \$8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bale Straw | \$6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Horse Show T-shirts | \$15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Specify Quantity & Size _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL DUE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | Name | | | OFFICE USE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | City | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | State Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | Phone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | All payback money will be paid to the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Make checks payable to: Salina Charity Horse Show

*****SEE OFFICE FOR RV HOOKUPS*****

We have read and accept the conditions under LIABILITY and SAFE SPORT in the General Rules and Regulations and agree to hold Salina Charity Horse Show harmless for any damage, loss, injury, or accident to property, animals, or show participants, and to abide by the provisions of Safe Sport as outlined.

Signature of Owner, Manager, or Trainer _____

ALL OUT OF STATE HORSES MUST SHOW CURRENT NEGATIVE COGGINS AND HEALTH PAPERS IN SHOW OFFICE BEFORE RECEIVING BACK NUMBERS