Return to: **Tri-State Open Show Entry** 180 Paine Road Pomfret Center, CT 06259

2021 TRI-STATE HORSEMEN'S ASSOCIATION OPEN HORSE SHOW ENTRY FORM

July 16-18 August 13-15

CIRCLE SHOW DATE:

June 4-6

Make checks payable to <u>TSHA</u>	Only paid entries will be considered pre-entries.	No phone entries.	All others will be charged a \$20.00 post-ent	ry fee.
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Full Name of Horse/Pony (one per entry, as on Coggins)	Sheet Size	Color	Sex	Year Foaled		ght	Breed Registry and Registration # (Papers must be attached for breed classes)
Name of Exhibitor (one per entry)	Jacket Size 2020 TSHA MEMBER		Date of Birth		Exhibitor's Home Address: (do not use your trainer's farm address		
		#		No			
E MAIL:							

Please CIRCLE your class numbers (do not use highlighter)	Regular Classes \$15.00	Classics and Charity Classes \$20.00 (bold and underlined

Friday Night: 1 2 3 4 5 6 7 8 9 10 11 12

<u>Saturday:</u> 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 <u>37</u> 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95

<u>Saturday Night:</u> 38 39 40 41 42* 43* 44 45 <u>Sunday:</u> 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161

Pre-Entries must be POSTMARKED by the FRIDAY prior to show date (Pre-Entry Postmark Deadlines: May 28th, July 9th, & August 6th)

Name of Additional Rider (For classes 42 and 43 ONL)	Y):

\$

BLUE OR BLACK INK ONLY

For office use only. DO NOT WRITE IN THIS BOX

ainer must sign the entry blank. In the event of his/her failure to do so, his/her first itor shall be construed as acceptance of the rules of the show involved and of the TSHA	(if after Friday preceding show)			Check#_ Check#_ Cash
im/her subject to said rules. TSHA has my permission to use my image to promote TSHA. Print	OFFICE FEE		15.00	
Parent/guardian signature required if exhibitor is less than 17 years of age. Trainers are accepting responsibility as the student's guardian by signing this form. Children 17 & under staying overnight must have adult supervision.	Credit/Debit Card Processing Fee (5% of sub-total)	\$		Cash ₋ -
Official 17 & dilaci staying overnight mast have addit supervision.		T		ſ

Other

Class Entry Fees

Other

Post Entry Fee \$ 20.00

TOTAL AMOUNT

Important

\$35.00 FEE CHARGED ON ALL RETURNED CHECKS

Associate with Entry(s) #

Rabies

From circled classes on this form

NON- MEMBER SHOWING FEE \$25.00

OFFICE USE ONLY

Coggins