

BRIDLESPUR HORSE SHOW

April 11-13, 2024

Entries must be postmarked by March 30, 2024

One Owner Per Entry Blank

MAIL ENTRIES TO:

Kelly McFaul

206 S Lark Ln

Wichita, KS 67209

316-650-2287 | fax: 316-462-0883

kellymcf@aol.com

| OFFICE USE | NAME OF HORSE | REG # | YR FOALED | SEX | BREED | HEIGHT | COLOR | |
|------------|----------------------|-------|-----------|-------|-------|--------|-------|------------|
| | RIDER/DRIVER/HANDLER | | CLASS | CLASS | CLASS | CLASS | CLASS | ENTRY FEES |
| | | | FEE | FEE | FEE | FEE | FEE | \$ |
| | RIDER/DRIVER/HANDLER | | CLASS | CLASS | CLASS | CLASS | CLASS | ENTRY FEES |
| | | | FEE | FEE | FEE | FEE | FEE | \$ |

| OFFICE USE | NAME OF HORSE | REG # | YR FOALED | SEX | BREED | HEIGHT | COLOR | |
|------------|----------------------|-------|-----------|-------|-------|--------|-------|------------|
| | RIDER/DRIVER/HANDLER | | CLASS | CLASS | CLASS | CLASS | CLASS | ENTRY FEES |
| | | | FEE | FEE | FEE | FEE | FEE | \$ |
| | RIDER/DRIVER/HANDLER | | CLASS | CLASS | CLASS | CLASS | CLASS | ENTRY FEES |
| | | | FEE | FEE | FEE | FEE | FEE | \$ |

I hereby enter the above horses and riders at my own risk and subject to the rules and regulations of the Show. I further agree that if any damage is occasioned or loss occurs to the horses exhibited, to any vehicle or other articles which I may send with said horses, I will make no claim therefore against the BRIDLESPUR Horse Show or any participating organizations.

OWNER (as appears on registration papers)

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

TRAINER

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

RIDER 1 _____

ADDRESS _____

CITY/STATE/ZIP _____

UPHA _____ AHHS _____ AMHA _____

RIDER 2 _____

ADDRESS _____

CITY/STATE/ZIP _____

UPHA _____ AHHS _____ AMHA _____

| | |
|-----------------------------------|-------|
| Total Class Fees | _____ |
| Horse Stalls @ \$170 | _____ |
| Tack Stalls @ \$170 | _____ |
| Early Arrival @ \$50 per stall | _____ |
| One-Day Stall @ \$90 | _____ |
| Office Fee @ \$30 per horse | _____ |
| Box Seats (6) @ \$200 each | _____ |
| Shavings @ \$13 (minimum 2) | _____ |
| NO OUTSIDE BEDDING ALLOWED | |
| Post Entry Fee @ \$25 per horse | _____ |
| Sponsorships | _____ |
| TOTAL FEES | _____ |

| | |
|--------------------------------------------------------------|--------------------------------------|
| PAYMENT METHOD | |
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card |
| Acct # _____ | |
| Exp _____ | Sec Code _____ |
| Name on Card _____ | |
| Signature _____ | |
| ALL CREDIT CARDS WILL BE CHARGED A 4% CONVENIENCE FEE | |

Emergency Contact #

Stable With/Arrival Date