

ENTRY FORM 2009

RIDERS NAME _____ Age as of 1/1/09 _____

HORSES NAME _____ AGE _____

ADDRESS _____ TOWN _____ ZIP _____

PHONE _____ DIVISION _____ SEAT _____

Please check one: Paying Day Fee _____ or Paying Per Class Fee _____
Pre Entry Fee amt. \$ _____ Pre Entry Fee amt. \$ _____
Post Entry Fee amt \$ _____ Post Entry Fee amt. \$ _____

CLASSES ENTERED

SHOWMANSHIP # _____ COST \$ _____

HALTER # _____ COST \$ _____

EQUITATION # _____ COST \$ _____

PLEASURE # _____ COST \$ _____

HACK # _____ COST \$ _____

“T” TRAIL # _____ COST \$ _____

DRIVING # _____ COST \$ _____

LEADLINE OPEN # _____ COST \$ _____

LEADLINE 1ST YR # _____ COST \$ _____

GREEN HORSE # _____ COST \$ _____

CFSS PLEASURE STAKE CLASS FEE = \$15.00 COST \$ _____

SUB TOTAL \$ _____

OF STALLS _____ @ DAY STALL FEE \$20 = _____

OF WEEKEND STALLS _____ @ WK FEE \$30 = _____

OFFICE FEE \$4.00 PER
HORSE PER SHOW _____

TOTAL DUE _____

I hereby enter this show at my own risk. I agree that I will not
make claims against any person(s) connected with this Show,
the Cheshire Fair assoc., and /or the Town of Swanzey for
damages or accidents that might occur

Riders Signature: _____

Parent/Guardian (if under 18 yrs of age) _____

Make Checks Payable to: **Cheshire Fair Horse Show**
and mail to: **Hazel Young, PO Box 552, W.Swanzey, NH 03469** (PHONE 603 357-0270)

