



Stock Horse of Dixie Summer Sizzler Show

Office Use Only:

BACK #

June 6-8, 2014

Southeastern Arena in Unadilla, GA

FILL OUT ONE FORM PER HORSE / RIDER COMBINATION**Email Entry June 2, 2014****No Entries accepted after 8am on June 8, 2014*****(Absolutely no entries, changes, withdrawals, or refunds after 8am on show day!)***

Name of Rider: _____ ASHA Member #: _____

Name of Horse: _____ Competition License #: _____

Address: _____ City, State: _____ Zip: _____

Phone: _____ Email: _____

Events ✓: Friday Clinic 8 am: _____ Saturday Clinic 8 am _____ Paid Warm Ups _____ Show Sun
9am _____**Show Entry Form (select classes for entry—remember ONE form PER horse & rider)**

CLASSES	OPEN	NON-PRO	LIMITED NON-PRO	GREEN HORSE (HORSE < 5YRS)	NOVICE	YOUTH
All 4 Classes (includes cattle charge)	\$160 _____	\$100 _____	\$100 _____	\$100 _____	\$100 _____	\$80 _____
Pleasure	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$10 _____
Trail	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$10 _____
Reining	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$10 _____
Work Cow (\$40 cattle charge)	\$70 _____	\$55 _____	\$55 _____	\$55 _____	\$55 _____	\$50 _____
TOTAL CLASS FEES	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Show Entry Fees (total from above) \$ _____

ASHA Office Fee (\$15 per entry) \$ 15.00

Friday Clinic \$200 \$ _____

Saturday Clinic \$100 \$ _____

Paid Cow Warm Up \$ 20 \$ _____

Paid Reining Warm Up \$ 10 \$ _____

Stalls Thursday-Saturday _____ (nights) x \$20 per night (# _____ of stalls) \$ _____

Shavings \$7 per bag \$ _____

RV Hook-ups _____ \$55 for 30 amp OR _____ \$85 for 50 amp \$ _____

ASHA Annual Membership \$25 (if needed) (_____) New Member—Must also submit ASHA Form OR (_____) Renewing Member \$ _____

ASHA Competitive License \$15 (if needed — one-time license for each horse entering competition) \$ _____

Paying for additional entries or \$ _____ Total for Back # _____ or Clinic Only for _____

clinic fees with one check? If \$ _____ Total for Back # _____ or Clinic Only for _____

Yes, enter Back #s or Name and \$ _____ Total for Back # _____ or Clinic Only for _____

Totals: \$ _____ Total for Back # _____ or Clinic Only for _____

Paid by: Check # _____ (payable to SHOD) Cash _____ Received By: _____ **TOTAL \$ _____**

By my signature below, I hereby acknowledge that I understand the risks involved in participating in equine and/or cattle events and voluntarily assume those risks. I agree that I will not hold the American Stock Horse Association, Stock Horse of Dixie, or Southeastern Arena, nor any of their directors, officers, employees, volunteers, or participants liable for any injury or personal property damage, including injury or illness to my horse, that may occur as a result of participating or spectating at any time during this event held March 7-9, 2014. I have read this release and understand its terms:

Participant's Signature (or if participant is a minor, Parent Signature): _____ **Date:** _____

WARNING: Under Georgia Law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 12 of Title 4 of the Official Code of Georgia Annotated.