

Entry Number: _____

Willowbrook Spring Shows 2010

Mar 14 Apr 18 May 16 Jun 13

Rider's Name _____ Street Address _____
 City _____ State _____ ZIP _____ IEHJA Member Yes No
 Best Phone (_____) _____ E-mail _____

Horse's Name _____ IEHJA Regis'd Yes No

Owner's Name _____ IEHJA Member Yes No

Trainer's Name _____ IEHJA Member Yes No

Rider/Handler is now signing up for,
 or has already signed up for
Series Hi-point (Check one):
 Yes (One-time fee \$35) No

Rider's Age on Nov 1, 2009 (Check one):
 Leadline 18 & 18 &
 8 & 12 & Over Over
 Under Under 13-17 Amat Prof

Class 1 commences at 8:00 am in Ring 2.
Class 26 commences at approx. 12:30 in Ring 1.

Every entry shall constitute an agreement and affirmation that the person making it, owner, lessee, trainer, manager, agent, rider, handler, and the horse: shall be subject to the local rules of the show; that every horse, rider, and/or handler is eligible as entered; that the owner and any of his representatives are bound by the rules of the show and will accept as final the decision of the show committee on any question arising under said rules, and agree to hold the show, its officials, directors, employees, and agents harmless for any injury or loss suffered during or in connection with the show, whether or not such injury or loss resulted directly or indirectly from negligent acts or promises of said officials, directors, employees, or agents of the show. I agree to indemnify and save harmless Willowbrook Riding club and IEHJA and the owners, directors, officers, members, employees, and agents thereof from and against any and all loss, costs, or expenses, or any claim thereof, of whatever nature arising or to arise, for and on account, or by reason of the entry or entries hereby made. I hereby represent and agree that in the event that the entries hereby made are made for and on behalf of an exhibitor under the age of 21 years, that I am one of the parents of such minor, or duly appointed legal guardian of such minor, entitled to make this entry for and on behalf of such minor, and I further hereby represent and agree that in the event that the entry is hereby made for and on behalf of another person other than a minor under the age of 21 years, I have full authority and privilege from such other person to make such entry for and on behalf of such other person. I accept full financial responsibility for this entry.

Mandatory: signature of Entrant or signature of Parent or Legal Guardian if competitor is under 21 years. Name (Print) _____

Signature _____

Write in Class Numbers to be Entered

OFFICE USE ONLY

Classes _____ x \$12 \$ _____
 Medal Classes _____ x \$ 17 \$ _____
 Jumper Classes _____ x \$ 17 \$ _____
 Total Class Entry fees \$ _____
 Scratch Fees/class _____ x \$ 6 \$ _____
 Hi-Point Fee \$35/entry (once per series) \$ _____
 Fees per entry (Office \$15; EMT \$5) \$ 20.00
 IEHJA Membership (**separate check**)
 Fees per horse (Grounds \$20; Drug \$5) \$ 25.00 paid by # _____
 (Other entrants using this horse _____)
 Miscellaneous (_____) \$ _____
 Stall Fees \$ _____
Total Fees \$ _____
 Open Check # _____ (Check covers following entries: _____)
 Payment Check # _____ Check Amount \$ _____ Of total \$ _____
 Cash Paid \$ _____