

The Ontario Miniature Horse Classic July

July 16th, 2011

Due to the increased ASPC/AMHR requirements of registration copies, amateur numbers, youth information and show schedules, I am requiring entries a month in advance of the show date. If you should need special arrangements for your entries please call Lea Dill – 315 986 3026 or norlea@aol.com

Name of Person Submitting Entry _____

Address _____ City, Province, Postal Code _____

Day Phone _____ Evening Phone _____ Email _____

Office Only	Please fill in	Name of Horse	ASPC/AMHR	Sex	Date of	Registered Owner of Horse
Horse #	Height	(Enter one class number per square under name of horse.)	Reg. No.		Birth 00/00/00	You must list City & Province of Owner.

Please list Exhibitor name for ALL Classes entered below

Class #'s	Horse's Name	Exhibitors Name Handling Horse in Class

Please list Amateur/Youth Names/Numbers at bottom of form. A copy of Amateur/Youth cards must accompany entries. Please include copies of a current 60 - day measurement card or a permanent measurement card validated for 2011. Checks should be made payable to "MHCO". Mail to: Lea Dill, 3590 Baker Road Walworth, NY 14568. It is required to include Copy of Reg. Papers, 2011 Youth/Amateur Cards & Cheque with entries.

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Office Fee Per Horse – Pre Entry Date - June 16 th	_____ x \$ 5.00 = \$ _____
Late Fee Charged After Pre-Entry Date per Horse	_____ x \$15.00 = \$ _____
Open Classes	_____ x \$ 15.00 = \$ _____
Amateur Classes	_____ x \$ 15.00 = \$ _____
Youth Classes-Per Class	_____ x \$ 15.00 = \$ _____
Or Flat rate for Youth/Open classes (Unlimited - Per Horse)	_____ x \$ 50.00 = \$ _____
Stalls (\$40 per stall)	_____ x \$ 40.00 = \$ _____
Shavings (per bag)	_____ x \$ 7.00 = \$ _____
Grand Champion Sponsor - \$20.00	_____ x \$ _____ = \$ _____
Champion Sponsor - \$15.00	_____ x \$ _____ = \$ _____
Class Sponsor - \$10.00	_____ x \$ _____ = \$ _____
Total Fees	\$ _____

Please list below how you want your name, stable and/or business announced for your sponsorship. We would like to invite our Sponsors to present the awards in center ring for the classes they are sponsoring.

Sponsor Name _____

Classes #'s you would like to sponsor _____

(Office Only) Cheque # _____ Amount _____ Difference Owed _____ No Chq. _____

In case of emergency, we are staying at _____ Phone _____

THIS FORM MUST BE SIGNED IN ORDER TO PARTICIPATE IN THE SHOW. This show is approved and conducted under the rules of the ASPC/AMHR and is open only to horses registered with the ASPC/AMHR. I hereby enter these horses in the above listed classes, by so entering I agree to abide by and be bound by all rules and regulations of ASPC/AMHR, agree to hold harmless the managers and sponsors of the show from all liability in case of accident, theft, injuries or loss in any way associated with my participation in this event. My signature is proof that I have read, understand and accept the above statement.

Authorized Signature of person submitting entries: _____ Date: _____

Parent or Guardian's Signature required for all Youth Exhibitors: _____

Amateur Name	ASPC/AMHR Amateur #	Relationship of Amateur to Owner Listed on Registration
Youth's Full Name	ASPC/AMHR Youth #	Age as of Dec. 31, 2010 & Date of Birth
		Age _____ DOB _____
		Age _____ DOB _____
		Age _____ DOB _____