Spread and a second		Spring Kickoff HORSE SHOW May 4, 2024				Spring Rickory
Entry Number		Horse's Name	Reg	. #	Age	Sex
PAY TIE OUT FE ALL CLASSES \$1 STICK HORSE BAI Adult and Youth Div All entries get a priz \$5 entry TENNIS BALL TOS \$5 per tennis ball Closest to the bullso \$275 Gift Certificate SPECIAL AWARDS • Trainer th • Trainer th	10 Entry RREL RUN visions ze SS eye wins e for Custom Show Pad	EXHIBITORS are responsible Exhibitor 1 Name: Street: City: Telephone # Email: Classes Entered (list class numbers Street: City: Telephone # Email: Classes Entered (list class numbers Street: City: Telephone # Email: City: Telephone # Email: City: Telephone # Email: City: Telephone # Email: Classes Entered (list class numbers	State: 	MFT Exhibit MFT Exhibit	Zip: HBA # tor Age (if yout Zip: HBA # tor Age (if yout	:h)
Owner's Name			MFTHBA Mem	ber#		
Street		City	Sta	ite	Zip	
Trainer's Name (if ap	plicable, MFTs only)					
Street		City	Sta	te	Zip	
	-	tly in training with the above trainer. Trai n for the show and that the horse has bee	-			-

Owner/Exhibitor (MFTs only, signature needed if listing a trainer)

time.

LIABILITY DISCLAIMER

RFTHF and any co-sponsoring organization shall not be responsible for any personal injury or for loss or damage to property occurring at any RFTHF activity. Each owner, exhibitor, handler, or attendee shall indemnify and hold harmless the RFTHF, its officers, directors, committees, and employees from and against all claims, demands, actions or omissions of an owner, exhibitor, handler or attendees. Presentation of signed entry shall be deemed acceptance of the condition of this rule. In the event any entry form is not signed or presented, appearance on the grounds of any RFTHF activity as an exhibitor, handler, owner or attendee shall be deemed to be acceptance of the condition of this rule.

Exhibitor understands that by signing this form he/she grants permission to the RFTHF to use any video film and/or pictures of the exhibitor or their horse for any advertising, promotional or educational purposes and holds RFTHF harmless of any liability.

Owner/Exhibitor or Parent/Guardian Signature **If exhibitor is a minor, parent or guardian MUST sign permission form

Office Use:	Coggins Accession Number:	Total # (of Classes Entered:
Total Payment:	CHECK #	CASH	Entered by