

**Gold Country Equestrian Center**  
Horse Show Entry Form

Show #

Rider: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Add to the mailing list? ☐ Yes ☐ No

Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Trainer: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Horse's Name: \_\_\_\_\_  
Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Age: \_\_\_\_\_

Classes Entered: \_\_\_\_\_

I agree to hold harmless GCEC, their employees, management, or any other person connected with this horse show from loss, damage, or injury to my horse, equipment, or to myself if resulting from my participation in any event or happening while riding in or around the show arena or surrounding property. I hereby enter and ride at my own risk and accept responsibility for any guest I have invited.

I agree to abide by the horse show rules, code of conduct and safety. I pledge not to endanger myself, my horse or others at any time.

Rider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

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Rider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

# of classes \_\_\_\_\_ @\$20/each: \_\_\_\_\_

– # of scratched @\$20/each: \_\_\_\_\_

California Drug Testing Fee: \$5.00

SAHJA fee: \$2.00

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Total \_\_\_\_\_  
(make checks payable to GCEC)

# of classes \_\_\_\_\_ @\$20/each: \_\_\_\_\_

– # of scratched @\$20/each: \_\_\_\_\_

California Drug Testing Fee: \$5.00

SAHJA fee: \$2.00

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Total \_\_\_\_\_  
(make checks payable to GCEC)