



City View Equestrian, LLC Hunter Show Entry Form

Office Use Only:

Back # _____

Reg # _____

Rider Name: _____

Rider email: _____

Rider Phone Number: _____

Horse Name (as you would like it announced): _____

Rabies Date: _____ Coggins Date: _____ Rhino/Flu Date: _____

Horse Owner Name: _____

Trainer Name: _____

Trainer Email: _____

Trainer Phone Number: _____

Please write the corresponding class numbers in the boxes – Ticketed warm ups can be purchased in the final section

Rider #1 Class Entries:

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Trainer Class Entries:

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Horses not competing must fill out an entry form in full and pay for EMT, office and grounds fee. Number must be worn while riding

	Classes Entered (\$15/class)	
	Ticketed Warm Up Trips (\$10/trip)	
1	EMT Fee (per rider/horse)	\$15
1	Office/Insurance Fee (per rider/horse)	\$15
	Non showing horse grounds fee (\$25/horse)	
	FOOD TICKETS \$1 each	
	Discounts (For Office Use Only)	
	Total:	

If paying with Venmo, fill out the section below and send payment to @cityviewseries **before** leaving the show:

Please put your back number, full name, and horse's name in the Venmo memo.

Venmo Email or Handle: _____

Stalls and shavings must be paid for in advance and are non-refundable unless show management cancels. Stalls are first come, first paid. Reservations will not be counted until paid in full.
Stalls are \$50 each (unbedded) and shavings are \$7 per bale

Participant's Release of Liability:

Horse sports involve inherent dangers and risk of harm to participants, both equine and human. I agree to hold harmless City View Equestrian, LLC, McCormack Properties, LLC, and all members and associates for any injuries resulting from participation in this event. By signing below, I acknowledge I have read, understand, and agree with this release of liability.

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If Rider is a MINOR (less than 18 years old):

Parent/Guardian (PRINT name) _____

Parent/Guardian Signature: _____

Date signed _____

.....
I certify that I am at least 18 years of age

Rider (PRINT name) _____

Rider's Signature _____

Date signed _____