Leon County Horsemen's Association
OPEN HORSE SHOW ENTRY FORM

This horse/rider entry is for the show on: (please check box)

❑ March 9, 2019 ❑ September 14, 2019 ❑ October 12, 2019

Entry Number: **Coggins Date:** ☐☐ / ☐☐ / ☐☐

Rider's Name: *(one letter/character per block)*

Horse's Name: *(one letter/character per block)*

Classes Entered: *(list one full class number in each block)*

Fee Breakdown:

Individual Classes—

LCHA Member: $5 x _____ = $_____

4-H/FFA Member: $6 x _____ = $_____

Non-Member: $7 x _____ = $_____

OR

All Day Fee—

❑ LCHA Member: $45

❑ 4-H/FFA Member: $55

❑ Non-Member: $65

Total Amount Due: _____

LCHA Use Only: ❑ Check #_____ ❑ Cash

Pursuant to Florida Statute 773, LCHA and its officers and volunteers shall be held harmless of all liability from any and all accidents or injuries sustained by the undersigned. Additionally, I acknowledge and agree to abide by the LCHA Points & Show Rules, to include any official determination from the Show Judge.

Signature: _____ Print Name: _____

If rider is under 18, parent/guardian must sign.

Only needed if different from Rider's Name listed above.