



The Crystal Horse Show

July 25 & 26, 2019

Make checks payable to **Show Office Services**

If pre-entering please Mail Entries to:

Sara Ressler

5985 Cuthbert Rd

White Lake, MI 48386

One Horse per Entry Blank

Leave Blank	Horse		
	Color	Age	Sex
	Breed	Reg. #	

Classes

Rider #1

Class#	Class#	Class#
Entry Fee:	Entry Fee:	Entry Fee:

Classes

Rider #2

Class#	Class#	Class#	Class#
Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:

Michigan Equine Activity Liability Act 351 of 1994 Under the Michigan Equine Activity Liability Act, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity. I hereby make this entries at my own risk and will hold Show Office Services, MSU, and AHAM, their members and employees, collectively and individually blameless in the event of loss, accident or injury.

OWNER Information

Signature: [Click here to enter text.](#)

Print Name: _____

Address _____

City: _____

State _____ Zip _____

Phone: _____

TRAINER Information

Signature: _____

Print Name: _____

Address _____

City: _____

State _____ Zip _____

Phone: _____

RIDER Information #1

Signature: _____

Print Name: _____

Date of Birth (Eq Rider) _____

RIDER Information #2

Signature: _____

Print Name: _____

Date of Birth (Eq Rider) _____

Entry Total	
Office fee \$5 per Horse	
Stalls - _____ @ \$65	
Camping _____ @ \$50	
Total	

Credit Card Information ____ Visa ____ M/C
Card Number

Name on Card

Exp _____ CVV _____ Zip Code _____