

Mid South Spring Premier Horse Show

May 22-24, 2025

Entries Postmarked after May 8th Pay Post Entry Fee

*****Checks for stall must be received with entries to guarantee your stalls. They are on a first come first serve basis*****

Make checks payable to:

MSSP

Non-US checks must be marked "Payable in US Funds"

Mail To: Janie Hamilton

839 Ferry Road

Hixon, TN 37343

Phone (214) 478-0897

E-Mail: dkhoss@aol.com

ONE HORSE PER ENTRY BLANK

PLEASE PRINT OR TYPE (Fill out completely)

OWNER

Address _____ City/State/Zip _____

Phone _____ Cell Phone # _____ Email _____

TRAINER

Address _____ City/State/Zip _____

Phone _____ Cell Phone # _____ Email _____

RIDER/DRIVER/HANDLER

Address _____ City/State/Zip _____

Phone _____ Cell Phone # _____ Email _____

| Office use | Horse Name | | | | | Registration # | |
|------------|------------|-----|--|-----|--|----------------|------------|
| Color | | Sex | | Age | | Height | |
| Class # | | | | | | | Total Fees |
| Entry Fee | | | | | | | |

| | | | |
|--|--|----|--|
| | Total Entry Fees | \$ | Stable With: (must appear on both entry forms) <hr/> Stalls Available Tuesday, May 20, 2025 Arrival Date: <hr/> Hotel while at MSSP: <hr/> Emergency # |
| | Post Entry Fee @ \$20.00 per horse after May 8, 2025 | \$ | |
| | Stalls @ \$130 per stall | \$ | |
| | Office Fee @ \$25.00 per horse/academy rider | \$ | |
| | Box Seats (seats 6) @ \$150.00 per box | \$ | |
| | VIP Table @ \$250.00 | \$ | |
| | Grounds Fee @ \$40.00 (per day/per horse) | \$ | |
| | Sponsorships | \$ | |
| | Shavings @ \$9.00 per bag | \$ | |
| | RV Hook Up @ \$35.00 per day | \$ | |
| | | | |
| | TOTAL REMITTANCE TO: | \$ | |
| | MSSP | | |

ENTRY AGREEMENT ON THE BACK MUST BE SIGNED Signed: YES

No

Mid South Spring Premier HORSE SHOW

RELEASE OF LIABILITY

I AGREE that neither the Mid South Spring Premier Horse Show and their volunteers and sponsors, American Saddlebred Horse Association of Alabama's (ASHAA) officers, and the Northeast Agribusiness Center, the show management nor the officials of the show, nor any affiliated or participating organizations, will be responsible for any accident, damage, loss or injury to mount, owner, rider or other persons or property. It will be the condition of entry that each exhibitor shall hold the horse show and its management blameless for any loss or accident to any animal, person or property that may occur at the show. Under Alabama law, an equine activity sponsor or equine professional is not liable for any injury or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to the Equine Activities Liability Protection Act. (Code of AL 1975 6-5-337).

I hereby enter the above horse and riders listed on this entry blank at my own risk and subject to all of the rules and regulations of the horse show. I further agree that the show committee of the Mid South Spring Premier Horse Show and their volunteers and sponsors, and the Northeast Agribusiness Center will not be responsible for any accident which may occur to any owner, vendor, spectator, driver, rider, groom, attendance animal, or equipment at the show. Each entry at this show shall constitute an agreement and affirmation that the person making it along with the owner, lessee, trainer, manager, coach, parent, driver, and the horse; shall be subject to the rules of the show; that every horse, rider, and/or driver is eligible as entered; that the owner and any of his representatives agree to hold all persons harmless for any injury or loss resulted directly or indirectly, from the negligent acts of said person.

RIDER/DRIVER/HANDLER (Mandatory)

Signature Required (Parent/Guardian if under 18)

Signature: _____

Print Name: _____

OWNER/AGENT (Mandatory)

Signature Required (Parent/Guardian if under 18)

Signature: _____

Print Name: _____

TRAINER (Mandatory)

Signature Required (Parent/Guardian if under 18)

Signature: _____

Print Name: _____

PARENT/GUARDIAN SIGNATURE (Required if Rider/Driver/Handler is a minor)

Minor's Name: _____

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Emergency Contact Phone Number: _____