

**PAYMENT TO COVER ALL FEES  
MUST ACCOMPANY ENTRIES**

# ACADEMY CLASSES ENTRY BLANK

April 13, 2019  
BRIDLESPUR HORSE SHOW

**Make Checks payable and mail to  
BRIDLESPUR HORSE SHOW**

Kelly McFaul  
206 S. Lark Ln, Wichita KS 67209  
316-650-2287

Office Use	Class #	Class #	Horse	Rider	Age	City, State	Fee
						<b>TOTAL ENTRY FEES</b>	\$

I hereby enter the above horses and riders at my own risk and subject to the rules and regulations of the Show. I further agree that if any damage is occasioned or loss occurs to the horses exhibited, to any vehicle or other articles which I may send with said horses, I will make no claim therefore against the Bridlespur Horse Show or any participating organizations.

Instructor		#	STALLS at \$135 each	\$
Stable		#	OFFICE FEE AT \$30 PER HORSE/RIDER COMBINATION	\$
Address		#	BAG SHAVINGS AT \$9 PER BAG (Minimum of 2)	\$
City/State/Zip		#	Box Seats @ \$150 each (8 seats)	\$
Signature			HORSE SHOW SPONSORSHIP	\$
Phone		#	ONE-DAY STALL @ \$65	\$
e-Mail Address				
			<b>TOTAL AMOUNT DUE</b>	\$

Visa/Master Card Accepted: Card No. \_\_\_\_\_ Card Holder Name (Print) \_\_\_\_\_

Billing Address/Zip \_\_\_\_\_ Exp \_\_\_\_\_ CVV \_\_\_\_\_ Card Holder Signature \_\_\_\_\_

CHECK # \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

**ALL CREDIT CARDS WILL BE CHARGED 3% CONVENIENCE FEE**

**ALL HORSES MUST HAVE NEGATIVE COGGINS TEST PERFORMED WITHIN 12 MONTHS OF SHOW, AND HEALTH PAPERS FOR ALL OUT-OF-STATE HORSES CURRENT WITHIN 30 DAYS**

# BRIDLESPUR HORSE SHOW

April 11-13, 2019—Entries Close March 30, 2019

One Owner Per Entry Blank

**MAIL ENTRIES TO:**  
 Kelly McFaul  
 206 S Lark Ln  
 Wichita, KS 67209  
 316-650-2287 | fax: 316-462-0883  
 kellymcf@aol.com

OFFICE USE	NAME OF HORSE	REG #	YR FOALD	SEX	BREED	HEIGHT	COLOR	
	RIDER/DRIVER/HANDLER		CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$
OFFICE USE	NAME OF HORSE	REG #	YR FOALD	SEX	BREED	HEIGHT	COLOR	
	RIDER/DRIVER/HANDLER		CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$

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**OWNER (as appears on registration papers)**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_  
 EMAIL \_\_\_\_\_

**TRAINER**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_  
 EMAIL \_\_\_\_\_

**Total Class Fees**

\_\_\_\_\_ Horse Stalls @ \$135 \_\_\_\_\_  
 \_\_\_\_\_ Tack Stalls @ \$135 \_\_\_\_\_  
 \_\_\_\_\_ Early Arrival @ \$25 per stall \_\_\_\_\_  
 \_\_\_\_\_ One-Day Stall @ \$65 \_\_\_\_\_  
 \_\_\_\_\_ Office Fee @ \$30 per horse \_\_\_\_\_  
 \_\_\_\_\_ Box Seats (8) @ \$150 each \_\_\_\_\_  
 \_\_\_\_\_ Shavings @ \$9 (minimum 2) \_\_\_\_\_  
 \_\_\_\_\_ Camper Hookup @ \$30/night \_\_\_\_\_  
 \_\_\_\_\_ Sponsorships \_\_\_\_\_

**TOTAL FEES** \_\_\_\_\_

**RIDER 1**

ADDRESS \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_  
 UPHA \_\_\_\_\_ AHHS \_\_\_\_\_ AMHA \_\_\_\_\_

**RIDER 2**

ADDRESS \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_  
 UPHA \_\_\_\_\_ AHHS \_\_\_\_\_ AMHA \_\_\_\_\_

**Stable With/Arrival Date**

**PAYMENT METHOD**

Check  Credit Card

Acct# \_\_\_\_\_  
 Exp \_\_\_\_\_ CVV \_\_\_\_\_

Street / Zip \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Signature \_\_\_\_\_

**ALL CREDIT CARDS WILL BE CHARGED A 3% CONVENIENCE FEE**

**Emergency Contact #**