

Checks must accompany entries and should be made payable to: **K.M.H.C.**

Mail to: **Keystone**, Lea Dill, 3590 Baker Road, Walworth, NY 14568-9731

Pre-Entry Deadline – Wednesday May 6th, 2009

Open/Amateur	_____ x \$25.00 = \$ _____
Open/Amateur - Entries after May 12 th .	_____ x \$30.00 = \$ _____
PMC Classes	_____ x \$15.00 = \$ _____
Youth Classes	_____ x \$15.00 = \$ _____
Youth Classes - Entries after May 12 th .	_____ x \$20.00 = \$ _____
Stall Fees: Include one bale of straw	_____ x \$25.00 = \$ _____
Second horse in stall	_____ x \$10.00 = \$ _____
Straw	_____ x \$05.00 = \$ _____
Regular Class Sponsors - \$25.00	_____ x \$25.00 = \$ _____
Championship Classes - \$30.00	_____ x \$30.00 = \$ _____
	TOTAL \$ _____

Class Sponsor Name: _____

Class Number's I wish to sponsor: _____

Cash _____ Check Number: _____ Check Total: _____ Difference Owed \$ _____

ALL ENTRIES at The Keystone Classic Miniature Horse Show - AMHR sanctioned horse show shall constitute an agreement & affirmation that the person making this entry is the owner, lessee, trainer, manager, agent, coach or driver of the horse:

Shall be subject to the rules of The Keystone Classic Miniature Horse Show and the ASPC/AMHR

1. That every horse, and/or driver is eligible as entered.
2. That the owner and any of his representatives are bound by the rules of the Show and ASPC/AMHR and the show grounds, their officials, directors and employees.
3. That the owner and any of their agents or representatives acknowledge that they participate voluntarily in the competition. They are fully aware that equine sports and the competition involve inherent dangerous risk and by participating they expressly assume any and all risks of injury or loss. They agree to hold The Show, ASPC/AMHR, the show grounds, the competition, their officials, directors, employees and agents harmless for any injury or loss from the negligent acts or omissions of said officers, directors, employees or agents of the Show and ASPC/AMHR or show grounds.

Permission for minor to show: I hereby consent to the entry of the children below.

Name _____ Birth Date _____ AMHR Youth Number _____

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Name _____ Birth Date _____ AMHR Youth Number _____

Address _____ City _____ State _____ Zip Code _____ Phone _____

To participate in this horse show and certify that I have read the foregoing representations and statements and that the same may be deemed a part hereof and hereby accept responsibility thereunder for the participation of said minor.

Signature of Exhibitor: _____

Signature of Parent/Guardian of persons listed above: _____ Date _____

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**The Keystone Classic Miniature Horse Show,
June 6th, Bloomsburg Fairgrounds,
620 West Third Street, P.O. Box 479, Bloomsburg, PA 17815
QUESTIONS – 315 986 3026**

Name of Entries submitted under _____

Address: _____ City: _____ State: _____ Zip: _____

DayPhone _____ Evening Phone _____ Email _____

Amateur Name(s) and Number(s) _____ Amateur # _____

Youth Name(s) and Birth date(s) _____ Youth # _____

Office		Name of Horse (Enter one class number per square under name of horse.)	AMHR Reg. No.	Sex	Date of Birth 00/00/00	Registered Owner(s)/Lessee of Horse, City & State
Horse #	Height					

Please List Exhibitor & Horse Combination for All Classes

Horse's Name	Class #'s	Handler Name	Amateur or Youth Number

For downloadable Show information, entry forms and class schedule

www.keystonemhc.com