Ranchotel Horse Show Entry Form

5790 Rivera Rd.
Vacaville, CA 95688
On Interstate 80, 1 mile west of Vacaville (Pena Adobe Exit)

Stable Phone: (707) 592-1156
Motel Reservations: (707) 448-2435
www.ranchotelhorsecenter.com

Show Date: _____ **Exhibitor #:** _____

Breed: _____ **Sex:** _____ **Age:** _____ **Horse's Name:** _____

Title of Class	Rider or Handler	Class #	Fee

Total Class Entries: _____

Are you a trainer or do you give riding instructions? ☐ **Yes** ☐ **No**
(Trainers are not eligible for Show Hi Point Awards)

Drug Fee per Horse: $5.00

Stalls @ $40 # _____ = _____

Charity Donation: _____

Are you a Region 1 member? ☐ **Yes** ☐ **No**

Other: _____

TOTAL DUE: _____

THIS FORM MUST BE SIGNED BY EXHIBITOR OR AUTHORIZED AGENT & PARENT OR GUARDIAN OF MINOR

I hereby enter the above horse(s) at my own risk and subject to all rules and regulations of the show. I further agree if any damage be occasioned by or loss or damage occur to the horse(s) exhibited from any cause, or to any equipment that I may send with such horse(s) , I will make no claims thereof. I participate voluntarily in the show fully aware that the horse sports and competition involve inherent dangerous risk or serious injury or death, and by participating, I (we) expressly assume any and all risks of injury or loss, and agree to indemnify and hold RANCHOTEL HORSE CENTER, their officials, employees and agents harmless against any legal proceedings for potential injury or property damage arising from an accident occasioned by an employee, rider, driver, handler, agent or entry of mine and from and against all claims including for any injury or loss suffered during or in connection with the show, whether or not such claim, injury or loss resulted, directly or indirectly, from the negligent acts of omissions of said officials, directors, employees, or agents of the RHC or show.

Owner: _____ **Handler:** _____ **Age:** _____

Address: _____ **Address:** _____

City: _____ **Zip:** _____ **City:** _____ **Zip:** _____

Phone: (____) _____ **Phone:** (____) _____

e-Mail: _____ **e-Mail:** _____

Signature: _____ **Signature:** _____

Owner of Horse or Adult Rider

Parent or Guardian of Minor Exhibitor