

KMHB Mini Breeders Cup – AMHA Show - KMHBC Sponsored – July 22nd and 23rd 2017

Name: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____

Office fee Per Horse	_____	x \$ 5.00	
AMHA Fee	_____	x \$ 3.00	
Amateur/Open Class Entry	_____	x \$ 40.00	
Youth Class Entry	_____	x \$ 30.00	
Classes #96	_____	x \$ 10.00	
** Flat Rate Entry \$150 Per Horse	_____	x\$150.00	
Campsite Per Night	_____	x\$ 30.00	
Stalls	_____	x\$ 45.00	
Bedding per bag	_____	x\$ 6.50	
Total Enclosed	_____		

Postmark Entries by July 3rd to avoid late Fees.

If Late fees apply, you will be charged at the show!

Full AMHA Registered Name of Horse	Exhibitor Name(S) One per line	Class Number	AMHA Reg #	Birth Date	Sex	Registered Owners Name and Address	Office Use Only	
							Height	Show #
	1)							
	2)							
	1)							
	2)							
	1)							
	2)							
	1)							
	2)							

Signature of Amateur and Number

Signature of Amateur and Number

Signature of Youth and Number
Youth Birth Date _____

Signature of Youth and Number
Youth Birth Date _____

This form must be signed in order to participate in the show. This show is approved and conducted under the rules of AMHA and is open only to horses registered with AMHA. I hereby enter these horses in the classes listed above. By so entering, I agree to abide by and be bound by all rules and regulations of AMHA, Shelby Co. Fairgrounds, and Kentucky Miniature Horse Breeders Club. I agree to hold harmless the manager, show staff, AMHA, and sponsors of the show from all liability in case of accident, theft, injuries or loss in any way associated with my participation in this event. My signature is proof that I have read, understand, and agree to accept this Statement.

Signature of Exhibitor

Signature of Parent or Legal Guardian

Make Checks payable to: KMHBC
Mail Entries to: Kimberly Sullivan
289 Galloway Rd. Stamping Ground, KY 40379

