

Mail Entries To:
Pamela Godin
 162 Mason Road
 New Ipswich, NH 03071

American Connemara Pony Society Region 1 Breed Show
South Woodstock, Vermont
 July 31 and August 1, 2010

ONE LINE PER HORSE/RIDER COMBO (*photocopy form if necessary*)

Number (Office Use Only)	Pony's Registered Name and breed	Rider/Handler	Jr / Sr	Classes	Costume class	For Sale
					Y N	Y N
					Y N	Y N

Make checks out to ACPS, Region I.
Copy of 2010 Coggins and ACPS registration required for
each equine entered. PLEASE SIGN THE BACK!!

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In Hand Classes@ \$15/ea		
Performance Classes@ \$20/ea		
Stalls @ \$25/ea/night		
Shavings @ \$10/bag		
Friday Barbecue @\$10		
Sat Dinner Adult @ \$20		
Sat Dinner Child @ \$12 (age 12 or younger)		
Post Entry Fee (after 7/14/2010)		(20.00)
Total Money Owed:		

Pam's contact info for clarifications:
Cell# 603 801-7387 pamgod@gmail.com

For Dressage Test of Choice, please list test you will
ride _____

For Friday night barbecue and Saturday night
banquet, awards, auction & fun
sign up here or call Susan at 802-484-5540 or
goodfarm@vermontel.net

PLEASE FILL OUT COMPLETELY. "SAME" or photocopied signatures are not acceptable.

Name of party responsible for this entry: _____

Mailing Address: _____

Home Phone: _____

Work Phone: _____

Alternate Phone: _____

EMAIL: _____

We will be contacting you via email for any problems or questions related to your entry.

Release:

I understand that the sport of horseback riding and driving is inherently dangerous and that serious injury and death can occur. I agree that if any injury occurs to me or to my horse or to any equipment that I may use or send to use, I will make no claim against GMHA or the GMHA Youth Center or any of the officers, Director, Trustees, Employers, Volunteers, and any Landowners free and harmless from any liability, claims, suits, or damages of whatsoever kind or nature that may be occasioned by the horses used by me or the negligence of the persons in charge of such horses and I agree to indemnify and hold harmless these organizations and individuals against all liability, claims, suits, and expenses including attorney fees incurred, arising out of any injury to any person or damage to any property caused by me, my horse, or attendants.

Owner/Agent: _____ **(signed)** _____ **Pony's Name**
_____ **(printed)**

Owner/Agent: _____ **(signed)** _____ **Pony's Name**
_____ **(printed)**

Rider (or parent/guardian if minor): _____ **(signed)**
_____ **(printed)**

Rider (or parent/guardian if minor): _____ **(signed)**
_____ **(printed)**