

Placed in this class

CAROLINA MID-EAST ENTRY FORM

ENTRY NUMBER: _____ CLASS NUMBER: _____ CLASS NAME: _____

EXHIBITOR: _____ Age of Exhibitor if under 18 _____

HORSE'S NAME: _____

ADDRESS: _____ N.C. _____
City/Town Zip Code

Phone: _____ E-MAIL: _____
Cell Home

PLEASE PRINT CLEARLY

Land owner, sponsors, show personnel and/or participants will not be held responsible for any accidents, injuries or deaths to any person, animal or property. By signing this document I understand and agree.

Signature by responsibility party over 18: _____ Date: _____

OFFICE USE ONLY
PLACED IN CLASS: _____ POINTS AWARDED _____

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