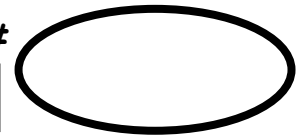


GSPA Entry Form

Entry#



Horse's Name	PHBA #	Sex	Yr. Foaled
--------------	--------	-----	------------

Owner's Name	PHBA #	Phone:	Email
--------------	--------	--------	-------

Address:	City:	State:	Zip:
----------	-------	--------	------

Exhibitor #1 (Am/Youth Relationship: _____) Youth Birthdate: _____ Please use one square for each **complete** class number

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

Exhibitor #2 (Am/Youth Relationship: _____) Youth Birthdate: _____ Please use one square for each **complete** class number

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

Exhibitor #3 (Am/Youth Relationship: _____) Youth Birthdate: _____ Please use one square for each **complete** class number

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

I hereby enter the above horse at my own risk & subject to all rules & regulations of GSPA & ground rules of McCoy Equestrian Center. I agree to indemnify and hold harmless GSPA, PHBA, and City of Chino Hills and any agent or employee of the above against any and all claims, liabilities, losses, costs, damages and attorneys fees incurred resulting from the participation of the above entries, nor will I make any claim against them.

SIGNATURE (Owner/Agent/Exhibitor) _____

Parent or Guardian _____

Address _____

City _____ State _____ Zip _____ Phone _____

Open Classes	@ \$7	\$ _____
Open Classes	@ \$6	\$ _____
PHBA Classes	@ \$10	\$ _____
Calif. Drug Fee	@ \$5	\$ 5
Grounds Fee	@ \$5	\$ 5
GSPA membership (optional)		
	@ \$20	\$ _____
Total Due	\$	_____

Pd. Check #
Pd. Cash