Highfields Horse Show: May 2-3, 2009 *(Closing Date: April 20, 2009)*

Date Received: _____

OFFICE USE ONLY	HORSE NAME	HORSE RECORDING #	RIDERS	CLASSES
	COLOR / SEX / HT. / AGE / GREEN 1 2	HORSE/PONY SM MD LG		

ENTRY AGREEMENT OWNER

OWNER NAME
ADDRESS
ADDRESS
CTY/ST/ZIP
E-MAIL
TEL.

RECIPIENT OF PRIZE MONEY AWARDS

NAME OF INDIVIDUAL OR CORPORATION
SS# __ __ __ - __ __ - __ __ __ __ --OR-- FED ID# __ __ - __ __ __ __ __ __ __
ADDRESS
CTY/ST/ZIP

RIDER ONE

RIDER NAME B-DAY MM/YY
ADDRESS
CTY/ST/ZIP
E-MAIL
TEL.

RIDER TWO

RIDER NAME B-DAY MM/YY
ADDRESS
CTY/ST/ZIP
E-MAIL
TEL. RIDER USEF # [ ]

TRAINER

NAME
FARM NAME
ADDRESS
CTY/ST/ZIP
E-MAIL
TEL.

PAYABLE TO

PSJ
147 Warehouse Road
Aiken, SC 29801

CANADIAN EXHIBITORS REFER TO PRIZE LIST "RULES & REGS" AS TO PAYMENT IN U.S. FUNDS.

MISC. FEES

HORSES ARRIVE:

STABLE WITH:

PSJ Entry Agreement

Under penalty of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and (2) I am not subject to backup withholding either because I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends or IRS has notified me that I am no longer subject to backup withholding (does not apply to real estate transactions, mortgage interest paid, the acquisition or abandonment of secure property, contributions to an individual retirement arrangement (IRA), and payments other than interest or dividends). I agree to indemnify and save harmless The Aiken Spring Classic & Progressive Show Jumping, Inc. (PSJ) all and singular, the directors, officers, members, employees and agents thereof from and against any and all loss, costs or expenses, or any claim thereof, of whatever nature arising or to arise, for an account, or by reason of entry or entries hereby made thereby represent agree in the event that the entries hereby made are made for and on behalf of an exhibitor under the age of 21 years, that I am one of the parents of such minor, or duly appointed legal guardian of such minor, and as such, entitled to make this entry for and on behalf of such minor, and I further hereby represent and agree that in the event that the entry hereby made for and on behalf of another person other than a minor under the age of 21 years, I have full authority and privilege from such other person to make such entry for and on behalf of such other person.

Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity. Pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.

Stall	$65 x _____	= $ _____
Ship-in/Day	$15 x _____	= $ _____
RV Hook-up	$65 x _____	= $ _____
Service Fee	$15 x _____	= $ _____
Late Fee	$15 x _____	= $ _____
Paddock	$75 x _____	= $ _____
Non-Showing Fee	$30 x _____	= $ _____

PLEASE CALL SHAVINGS ORDERS INTO OFFICE OR SEND EMAIL

803-649-3505 / PSJSHOWS@AOL.COM

Total Amount Enclosed

$ _____

MANDATORY

OWNER/AGENT SIGNATURE: _____ PRINT NAME: _____	RIDER/HANDLER SIGNATURE: _____ PRINT NAME: _____ Is Rider a U.S. Citizen? YES [ ] NO [ ]	TRAINER SIGNATURE: _____ PRINT NAME: _____
PARENT/GUARDIAN SIGNATURE: _____ PRINT NAME: _____ (Required if Rider/Handler is a minor)	RIDER/HANDLER SIGNATURE: _____ PRINT NAME: _____ Is Rider a U.S. Citizen? YES [ ] NO [ ]	COACH SIGNATURE: (if applicable) _____ PRINT NAME: _____