## December 11-12

## MAKE CHECKS PAYABLE TO PSJ

"Fillable" PDF available online. E-Mail Entries to: psjshows87@gmail.com Mail Entries to: PSJ PO Box 3008 Aiken, SC 29802

# OFFICE ONLY	# Office Only Horse or Pony Name (only one per blank)					DR	Sex	Horse/Po	DNY <b>A</b> GE	
Name of First Rider		DOB	CLASSES (Schedule can be found at psishows.com)							
NAME OF SECOND RIDER		DOB	CLASSES (	SCHEDULE	DULE CAN BE FOUND AT PSJSHOWS.COM)					
ber to be issued to me) a (IRS) that I am subject to subject to backup withhol erty, contributions to an ir harmless The Progressiv against any and all loss, entries hereby made ther	nd (2) I am not subject to backup withholding ei backup withholding as a result of a failure to re ding (does not apply to real estate transactions, ndividual retirement arrangement (IRA), and pay e Show Jumping, Inc. (PSJ) all and singular, the costs or expenses, or any claim thereof, of what eby represent agree in the event that the entries	is my correct tax ther because I I port all interest mortgage intere ments other that e directors, office tever nature aris hereby made a	cpayer identification number (or I am waiting for a nave not been notified by the Internal Revenue S or dividends or IRS has notified me that I am no st paid, the acquisition or abandonment of secure n interest or dividends). I agree to indemnify ancers, members, employees and agents thereof from the property of the property of the property and an exhibitor under the of such primer and as such patient to make this	ervice onger prop- d save m and ntry or le 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, entitle to make this entr 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 or behalf of such other person.					<u> </u>					
equine activity resulting f 1976.	aw, an equine activity sponsor or equine profestrom an inherent risk of equine activity. Pursual pates in the show is responsible for knowledge.	nt to Article 7, (	ble for an injury to, or the death of, a participant Chapter 9 of Title 47, Code of Laws of South Ca	in an rolina,						
Every person who partici	vales III the show is responsible for knowledge	or and is subjec	to the rules of the sanctioning associations.			Jı	ust for Fun Si	how Fees		
Owner		Trainer				Show Stall -	1 day	\$25		
						Show Stall - :		\$45		
						Additional Sta	all Nights	\$10		
		SS/TIN	Y	N		Ship-in/day		\$15		
Name Associated with S	SS/TIN	Name Associat	ed with SS/TIN			RV Hook-up	- 1 day	\$25		
Phone		Phone				RV Hook-up	- 2 day	\$45		
					1	Service Fee		\$10	\$10	
Owner/Agent Signatur			ure			Late Fee		\$20		
						Non-Showing	g Fee	\$25		
Rider #1	<del>-</del>									
				— [						
City/State/Zip		City/State/Zip _		[				Total		
Rider/Agent Signature		Rider/Agent Signature						CHECK #		