## Entries close on March 28, 2024.

Entry fees and stall fees must accompany entry blank. Phone calls and open checks will not reserve stalls.

Entry Fees

Late Fees

Bedding

Camper

Sponsorship(s)

I will be staying at:

Memberships

Name of Horse and ASHBA Registration Number

Class Number Under Horse

Stalls (no bedding provided) \_\_\_\_\_ @ \$90 each Early Arrival (before April 10) \_\_\_\_\_ @ \$15/stall/day

Office Fee (per performance horse) \_\_\_\_\_\_ @ \$10

Office Fee (per academy rider) \_\_\_\_\_\_ @ \$5

## **ETSA Spring Classic Horse Show**

April 11-13, 2024

Tri-State Exhibition Center McDonald (Cleveland), TN Mail with payment to: Janie L. Hamilton 839 Ferry Rd Hixson, TN 37343

Make checks payable to ETSA Spring Classic Horse Show.

One account per form

Stalls will be open Wednesday, April 10.

Name:

Entry Fees

Total Entry Fees

\_\_\_\_\_ @ \$10 per horse

\_\_\_\_\_ @ \$8.50 per bag

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Emergency Contact Number:

nights @ \$40

Total Due:

Amount of Check:

Rider or Driver Owner Name: ASHBA Number: ASHBA number: Address: Junior Exhibitor DOB: City: State: Zip: Name: Name: ASHBA Number: ASHBA number: Address: Junior Exhibitor DOB: City: State: Zip: Name: Name: ASHBA Number: ASHBA number: Address: Junior Exhibitor DOB: City: State: Zip: Name: Name: ASHBA Number: ASHBA number: Address: Junior Exhibitor DOB: City: State: Zip: By signing below, I agree I understand Tennessee Code Annotated "44-2-101, et seg" and that ETSA Spring Classic Horse Show, Tri-State Exhibition Center, State of Tennessee, show management, the ETSA executive board, or officials will not be responsible for any accident, damage, loss, or injury to mount, owner, rider, or other person's property. Name: Address: City: State: Zip: Phone Number: Arrival Date: Email: Signature: I give ETSA Spring Classic the absolute right and permission to publish and use pictures of me in whole or in part for use online and in promotional and/or educational materials printed by the ETSA Spring Classic Horse Show. ☐ I agree ☐ I disagree For Office Use Only: Check #: Date Received: Amount: