

RIDER # _____

RAYVILLE SADDLE CLUB / RAYVILLE EQUESTRIAN CLUB

FUN SHOW/RAY-CLAY COUNTY 4-H SHOW

MAIL FORMS & PAYMENT TO:
Ray County Extension 4-H
PO Box 204
Richmond, MO 64085

Class Entry Form and Waiver of Release
(Please use a separate form for EACH horse)

Show Date: June 30th

4-H Member: Yes NO

County: _____

Horse Papers: YES NO

Exhibitor's Name: _____
(Please Print)

Horse's Name: _____
(Please Print)

Exhibitor's Age (as of Jan. 1): _____

Parent's Name (if Exhibitor is under 18 years of age): _____
(Please print)

Class No./Name List: (Circle All Classes entered):

- 6. 4-H Showmanship – Novice
- 7. 4-H Showmanship – 13 & Under
- 8. 4-H Showmanship - 14-18
- 14. 4-H English Pleasure – Novice
- 15. 4-H English Pleasure – 13 & Under
- 16. 4-H English Pleasure – 14-18
- 19. 4-H English Equitation – Novice
- 20. 4-H English Equitation – 13 & Under
- 21. 4-H English Equitation – 14-18
- 28. 4-H Western Pleasure – Novice
- 29. 4-H Western Pleasure – 13 & Under
- 30. 4-H Western Pleasure – 14-18
- 36. 4-H Western Horsemanship – Novice
- 37. 4-H Western Horsemanship – 13 & Under
- 38. 4-H Western Horsemanship – 14 -18
- 42. 4-H Reining - Open

- 48. 4-H OMG Cowboy Trail – Novice
- 49. 4-H OMG Cowboy Trail – 13 & Under
- 50. 4-H OMG Cowboy Trail – 14-18
- 56. 4-H Pole Bending – Novice
- 57. 4-H Pole Bending – 13 & Under
- 58. 4-H Pole Bending – 14-18
- 64. 4-H Cloverleaf Barrels – Novice
- 65. 4-H Cloverleaf Barrels – 13 & Under
- 66. 4-H Cloverleaf Barrels – 14-18
- 72. 4-H Flag Race – Novice
- 73. 4-H Flag Race – 13 & Under
- 74. 4-H Flag Race – 14-18
- 45. Ride-a-Buck – 14-18
- 44. Ride-a-Buck – 13 & Under

NOTE: 4-H members are allowed to enroll in non-4-H classes. An additional entry form will be required.

SADDLE CLUB USE ONLY:

TOTAL NO. OF CLASSES: _____
X (times)

ENTRY FEE/CLASS \$3.00
= (equals) \$ _____

OR

ALL DAY RIDE: \$25.00

Office fee per
Horse/Rider Combo: \$ 3.00

ADD ADDITIONAL HORSE(S) ENTRIES
(Separate entry form) \$ _____

TOTAL PAYMENT DUE \$ _____

CASH \$ _____

CHECK # _____

AMOUNT: \$ _____

RSC Office Staff: _____