GERMANTOWN CHARITY HORSE SHOW
June 3-7, 2025—entries received by 1:00 p.m. on the day of the class will receive a $20 discount!

NON-USEF ENTRY BLANK

MAIL ENTRIES TO:
GCHS
Mark Farrar
220 Farrar Rd
Shelbyville, TN 37160
gchsmanager@gmail.com

OFFICE USE	NAME OF HORSE		REG #		YR FOALED	SEX	BREED	HEIGHT	COLOR
	RIDER/DRIVER/HANDLER			CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES $
				FEE	FEE	FEE	FEE	FEE	
	RIDER/DRIVER/HANDLER			CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES $
				FEE	FEE	FEE	FEE	FEE	

I hereby enter the above horses and riders at my own risk and subject to the rules and regulations of the Show. I further agree that if any damage is occasioned or loss occurs to the horses exhibited, to any vehicle or other articles which I may send with said horses, I will make no claim therefore against the Germantown Charity Horse Show or any participating organizations. SIGNATURE_____

OWNER NAME_____

ADDRESS_____

CITY/STATE/ZIP_____

CELL PHONE_____

EMAIL_____

TRAINER NAME_____

ADDRESS_____

CITY/STATE/ZIP_____

CELL PHONE_____

EMAIL_____

RIDER 1_____

ADDRESS_____

CITY/STATE/ZIP_____

EMAIL_____

RIDER 2_____

ADDRESS_____

CITY/STATE/ZIP_____

EMAIL_____

PRIZE MONEY TO BE PAID TO:
Name:_____
Mailing Address: _____
City/State/Zip: _____
Phone_____
SSN or Tax ID_____

TOTAL CLASS FEES   _____

____ Horse & Tack Stalls @ $165   _____
        On or before May 17

____ Horse & Tack Stalls @ $210   _____
        After May 17

____ Grounds Fee (no stall) @ $15/day _____

____ Non-Showing Horse @ $135   _____

____ Office Fee @ $25 per horse   _____

____ Box Seats @ $300   _____

TOTAL FEES   _____

PAYMENT METHOD
❏ Check   ❏ Credit Card

_____
Acct #

_____   _____
Exp Date   Sec. Code

_____
Signature of cardholder

EMERGENCY CONTACT #

STABLE WITH