

Exhibitor # _____

ENTRY FORM Anti-Gimmick Trail Challenge Series

Kutie Performance Horses
5892 Applegate Road, Bowie, TX 76230



One entry per horse/rider combination per division

Exhibitor's Name: _____ Age, if youth: _____

Phone: _____ Email: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____

Name of horse: _____ Date: _____ Lab: _____

Coggin Assession #: _____

By my signature below, I hereby acknowledge that I understand the risks involved in riding horses and trail obstacles, and voluntarily assume those risks. I agree that I will not hold Kutie Performance Horses (KPH) and/or the competition management, nor any of their agents, officers, directors, employees, volunteers, or horse show participants or spectators liable for any injury or property damage to me, my horse, or my property, rising out of or caused by this horse competition. I have read this release and understand its terms.
Exhibitor's Signature: _____ Parent's Signature (if minor): _____

For Non-Pro Riders:

I certify that I have not received money or compensation for riding, training, or showing horses or training riders.

Exhibitor's Signature: _____

	Youth		Non-Pro		Open Jackpot		All entries must be received by the date below to avoid the \$20 late fee (calculated into 'day of registration' fee)
	Pre-Reg	Day of Reg	Pre-Reg	Day of Reg	Pre-Reg	Day of Reg	
March 28-29, 2015 Daniel Garcia and Steve Kutie Location: McKinney, TX	Clinic \$30	\$30	Show \$30	\$30	Clinic \$30	\$30	March 21, 2015
April 11, 2015 Mike Major Location: TBA	Clinic \$30	\$30	Show \$30	\$30	Clinic \$30	\$30	April 4, 2015
May 30, 2015 Steve Kutie Location: KPH in Bowie, TX	Clinic \$30	\$30	Show \$30	\$30	Clinic \$30	\$30	May 23, 2015
June 27, 2015 Sean Hayes Location: KPH in Bowie, TX	Clinic \$30	\$30	Show \$30	\$30	Clinic \$30	\$30	June 20, 2015
July 11, 2015 Stacey McAlexander Location: KPH in Bowie, TX	Clinic \$30	\$30	Show \$30	\$30	Clinic \$30	\$30	July 4, 2015
Trail Series Combo Package (all 5)	Clinic \$150		Show \$120		Clinic \$150	\$150	Must be purchased no later than March 28-29, 2015.
Total Fees	\$	\$	\$	\$	\$	\$	

Open Jackpot 60% Payback each show. (1st - 30%, 2nd - 20%, 3rd - 10%)

Overall trophy buckles awarded for the series winner per division. Exhibitors must compete in 4 out of the 5 shows in the series.

Schedule:

Clinic 8:00-12:00

Lunch 12:00-1:00 provided by KPH. (Free for those entered in clinic and/or show. \$5 for spectators.)

Show 1:00-completion

If stalls are needed, please contact us directly to discuss availability and costs prior to the event.

Checks payable to: Kutie Performance Horses

Mail Entries to: 5892 Applegate Rd, Bowie, TX 76230

Email Entries to: AntiGimmickTrailChallenge@gmail.com

Website Info: SteveKutie.com

Contact Number: 940-841-0885

Facebook: Anti-Gimmick Trail Challenge Series

Office Use Only:

Check # _____

Check Amount \$ _____

Cash Received \$ _____