

MAKE SURE TO INCLUDE:

- FULL PAYMENT
- FULL NAME
- GYPSY REGISTRATION
- COGGINS
- RABIES

**NEGHC  
GYPSY & OPEN  
HORSE SHOW  
SEPT 30 - OCT 1, 2017**

PRE ENTRY DUE: SEPT 15  
Checks to:  
New England Gypsy Horse Club  
MAIL ENTRIES AND PAYMENT TO:  
NEGHC  
50 View Way  
Cambridge, NY 12816



Horse's Name (1 horse per form please)		Registration (Gypsy, Gypsy Cross/ Drum Only)	
Horse's Year of Birth	Horse's Gender (Please circle one) <b>M G S</b>		Trainer/Stall with:
Owner:		NEGHC Member? (Please circle one) <b>Y N</b>	
Address:			
City:	State:	Zip	Cell Phone:

**ASTM helmets MUST BE worn by everyone under the age of 18. Exhibitors/owners need to have a parent/guardian sign for release if they are under the age of 18. Class Fees: \$20(shaded class #'s) for Gypsy, Gypsy Cross & Drum classes (\$15 for NEGHC members OR \$10 (non-shaded class #'s) For Open Classes. \$2 for Sit-A-Buck**

Exhibitor (name)												Signature (minors need parent/guardian's signature)												Date	
Please Circle The Class Number of Each Class Entered																									
1	2	3	4	5	6		8	9				13	14	15	16	17	18	19	20	21	22	23			
24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46			
47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69			
70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88 \$2	89	90	91				

2nd Exhibitor (name)												Signature (minors need parent/guardian's signature)												Date	
Please Circle The Class Number of Each Class Entered																									
1	2	3	4	5	6		8	9				13	14	15	16	17	18	19	20	21	22	23			
24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46			
47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69			
70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88 \$2	89	90	91				

3rd Exhibitor (name)

Signature (minors need parent/guardian's signature)

Date

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Please Circle The Class Number of Each Class Entered

1	2	3	4	5	6		8	9				13	14	15	16	17	18	19	20	21	22	23
24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69
70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88 <sub>2</sub>	89	90	91	

Stalls must be cleaned prior to leaving the grounds. For your convenience, our staff can clean the stall for you at the below-mentioned fee. Stalls WILL be checked – any stall left uncleaned without a cleaning fee payment will be billed to the rider, along with a \$10 service charge.

MAKE CHECKS PAYABLE TO: New England Gypsy Horse Club. Returned checks and unpaid entries will be subject to a \$25 service fee.

CASH IS PREFERRED PLEASE.

<p><b>OFFICE USE ONLY</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">RABIES</td><td style="width: 50px;"></td></tr> <tr><td style="text-align: center;">COGGINS</td><td></td></tr> <tr><td style="text-align: center;">Health Certificate</td><td></td></tr> <tr><td colspan="2" style="height: 20px;"></td></tr> <tr><td style="text-align: center;">CASH</td><td></td></tr> <tr><td style="text-align: center;">PAYPAL</td><td></td></tr> <tr><td style="text-align: center;">CHECK</td><td></td></tr> <tr><td colspan="2" style="height: 20px;"></td></tr> <tr><td style="text-align: center;">Back #</td><td></td></tr> <tr><td style="text-align: center;">Stall #</td><td></td></tr> </table>	RABIES		COGGINS		Health Certificate				CASH		PAYPAL		CHECK				Back #		Stall #		<p>Total Class Entry Fees: .....\$ _____</p> <p>___ Late Entry Fee \$3 (Per horse/per class).....\$ _____</p> <p>___ Horse Stall @ \$30singleday/\$40weekend.....\$ _____</p> <p>___ Unstabled Horse Fee @\$15 day (per horse).....\$ _____</p> <p>___ Tack Stall @\$25 each.....\$ _____</p> <p>___ Office Fee @ \$10/horse .....\$ _____</p> <p>___ Camper Fee @ \$25night/\$40weekend.....\$ _____</p> <p>___ Shavings @ \$6 bag .....\$ _____</p> <p>___ Stall stripped for you on Sun @ \$25/stall.....\$ _____</p> <p style="text-align: right;"><b>Total Fees.....\$ _____</b></p>
RABIES																					
COGGINS																					
Health Certificate																					
CASH																					
PAYPAL																					
CHECK																					
Back #																					
Stall #																					

RELEASE: The Undersigned hereby acknowledges that she/he is fully aware that participation in a horse show or other equine event involves inherent risk of injury due to the behavior of the animals involved and natural conditions. The undersigned hereby waives the right to institute a lawsuit for damages against or to recover damages from the New England Gypsy Horse Club (NEGHC), NEGHC's Board or members, The Schaghticoke Fairgrounds and any club, based on any injury that occurs due to such inherent risk. The undersigned also affirms that she/he is solely responsible for the choosing and maintaining the horse and equipment that the undersigned uses and that the undersigned waives any claim for damages against the NEGHC, the Schaghticoke Fairgrounds and any member based on an injury due to the behavior of any animal that participates in a horse show or clinic put on by NEGHC or any member club due to an equipment failure or defect. The undersigned further acknowledges that the NEGHC and The Schaghticoke Fairgrounds are not responsible for the conduct of other participants in such events and their animals and hereby waives any claim for damages against the NEGHC, the Schaghticoke Fairgrounds and any member based on an injury due to the conduct of another participant in such event or another participant's animal. I understand and accept the terms, conditions, and rules posted by NEGHC. I understand and accept that equine activities can be dangerous and that I may be exposed to risks that can cause serious injury or death. As a participant or spectator I agree to full responsibility for any and all injuries or property damage sustained at this event, and to make no claim against NEGHC or any of it's members, staff or volunteers for any injuries or damage regardless of cause. I have read the rules provided by NEGHC and I agree to follow them. I agree that my presence on this facility and entry into competition/clinic confirms absolutely my agreement to be bound to these terms.

\_\_\_\_\_ Owner's signature

If the exhibitor/owner is under 18 a parent/guardian must sign.

Exhibitors agree to this release by signing next to their name on this entry form.