THE 113TH CAMDEN HUNT HORSE SHOW

SUNDAY, MARCH 19, 2023 EVENT ENTRY FORM

- To reduce the risk of COVID-19 spread, pre-registration and payment is strongly recommended.
- To enter:

Complete and mail your entry to: The Camden Hunt, PO Box 2285, Camden, SC 29020; don't forget to include your entry fee payment and proof of negative Coggins; receive your rider number upon arrival.

- Complete, save and return your entry form by way of email to: thecamdenhunt.horseshow@gmail.com. Upon arrival, show proof of negative Coggins, pay entry fees, and receive your rider number.
- Note: Every rider must complete an entry form; a single rider may enter on up to 2 horses per entry form, but please, only one rider per form.

	Rider's Name Age, if u	ınder 18	Phone no. Owner's Name, (if different)
_	Rider's street address		City: State Zip
	Horse #1: Class entries. Check all that apply.		Horse #2, if applicable
			Class entries. Check all that apply.
	[1] [2] [3] [4] [5]	[6]	[1] [2] [3] [4] [5] [6]
	[7] [8] [9] [10] [11]	[12]	[7] [8] [9] [10] [11] [12]
	[13] [14] [15] [16] [17]	[18]	[13] [14] [15] [16] [17] [18]
	[19] [20] [21] [22] [23]	[24]	[19] [20] [21] [22] [23] [24]
	[25] subTotal no. of classes entered:		[25] subTotal no. of classes entered:
	Scratch Classes		Scratch Classes
	Add Classes		Add Classes
	Total no. of classes entered:		Total no. of classes entered:
	Class Fee: \$20 x no. of classes = PLUS \$60 for Derby, if appl.		Class Fee: \$20 x no. of classes = PLUS \$60 for Derby, if appl.
Total (Schooling Fee \$20/horse: \$ + Ringside Pa	_	0/vehicle + TOTAL Class fees from above: [Paid cash or check no]
	WAR	NING/RE	ELEASE FORM
in an			rofessional is not liable for an injury to or the death of a participa tivity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws
Liability	Release Please read carefully before signing.	Serious in	njury may result from your participation in this activity.
and wo greater waive a	g with The Camden Hunt. I acknowledge that I have I rking with equines. However, I/my child/my ward for than the risks I have chosen to assume. I hereby am t	been infor eel that th to be legall n or damag	ticipate in jumping clinic, trail riding, fox hunting, hunter pacing and remed by this document and am aware of the potential for risks in ridie possible benefits to individuals (myself or my child) being served by bound for myself, my heirs, assigns, executors, and/or administratiges to me, to my child/ward, to our horses and damages to our propagated waters.

Signature of Rider. If rider is under 18, Signature of Parent or Legal Guardian Required _