

OWNER			RIDER			TRAINER		
Owner Name			Rider Name			Trainer Name		
Address			Address			Address		
City	State	ZIP	City	State	ZIP	City	State	ZIP
Social Security # or TIN #			Phone			E-mail		
Phone			E-mail			Phone		
USEF/USHJA#			E-mail			USEF/USHJA#		
USEF/USHJA#			WShJA#			EC#		
USEF/USHJA#			WShJA#			EC#		
USEF/USHJA#			WShJA#			EC#		

Prize money paid to if other than owner			RIDER			CREDIT CARD PAYMENT		
Name			Rider Name			VISA/MC/AMEX #		
Address			Address			Exp. Date		
City	State	ZIP	USEF/USHJA#	WShJA #	Date of Birth	CVV	State	ZIP
Social Security # or TIN #			EC#			Signature		
EC#			Age as of 12/1/2024			Print Name		
ASPCA#			ASPCA#			ASPCA#		

NAME OF HORSE	AGE	COLOR	SEX	HEIGHT	RIDER	DIVISIONS / CLASSES				
	Please Circle below if applicable									
USHJA#	Sm	Md	Lg							

TOTAL ENTRY FEES FROM ABOVE:	
___ Stalls for entire show @ \$325	___ Stalls for weekend @ \$225
Dry Camping/No Hook Ups \$175/week	
Camper/Trailer parking, Power/Water \$275/week	
Camper/Trailer parking Power/Water/Septic \$325/week	
Hunter/Eq/Jumper Nomination Fee \$50/horse	
Haul-In Fee, \$50/day per horse	
Mandatory Schooling Fee, \$40 per horse	
Shavings & Manure Disposal Fee, \$125 per horse (\$100 for wknd stall)	
USEF Fee, \$23 per horse (Drugs and Meds \$15, USEF Fee \$8)	
USHJA Show Pass Fee, \$30	
USHJA Support Fee, \$10	
Photography Fee \$75 per horse	
Office Fee \$50	
Credit Card Convenience Fee 4%	
TOTAL AMOUNT OWED:	

Please put a checkmark and submit separate forms for each show

Spring National Inaugural

Spring National Hunter

Due March 24

Exhibitors may enter online by going to www.showgroundslive.com

EXHIBITORS WISHING TO BE STABLED WITH A SPECIFIC STABLE MUST HAVE THEIR ENTRIES IN BY March 28, 2025.

PLEASE COMPLETE AND SIGN USEF ENTRY AGREEMENT AND LIABILITY WAIVER FOUND ON FOLLOWING PAGES. FORMS MAY ALSO BE FILLED IN AND SIGNED ON THE WSHJA WEBSITE.

MANDATORY	OWNER/AGENT	RIDER/HANDLER	TRAINER
	SIGNATURE:	SIGNATURE:	SIGNATURE:
	Print Name:	Is Rider/Handler a U.S. Citizen (please circle): YES	Print Name:
	Parent/Guardian Sig.:	SIGNATURE:	SIGNATURE:
Print Name:	Is Rider/Handler a U.S. Citizen (please circle): YES	Print Name:	

CHECKS PAYABLE TO: **WSHJA** (US Funds)

MAIL TO: Mollie Gallaway, Show Secretary
85687 Pine Grove Rd
Eugene, OR 97405

Stable With: _____

Arrival Date: _____

Emergency Contact Phone Number: _____

Payment # _____ Total Enclosed _____