

**OMHCI Stillwater Stampede Miniature Horse Show  
Payne County Expo Center, Stillwater, OK - May 23-24, 2009  
ENTRY FORM - Entries Close-----May 13, 2009**

Name: _____ Farm Name: _____ Address: _____ City: _____ State: _____ ZIP: _____ Phone #: _____ Email _____	<p align="center"><b>Youth/Amateur Information</b></p> Name _____ Age* _____ AMHA # _____ Name _____ Age* _____ AMHA # _____ Name _____ Age* _____ AMHA # _____ Name _____ Age* _____ AMHA # _____ Name _____ Age* _____ AMHA # _____ *Youth Age as of January 1, 2009
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I hereby enter AMHA registered miniature horses in the classes below. In entering the horse(s) in participation of such event and in making use of property privileges, I will abide and be bound by all rules and regulations. I hereby hold harmless the show manager, show secretary, show organizers, sponsors or sponsor management from any loss, damage or injury to any person or property resulting from such entry, participation or use of such property or privileges.

EXHIBITOR SIGNATURE: \_\_\_\_\_  
 PARENT OR GUARDIAN Signature for YOUTH EXHIBITORS: \_\_\_\_\_  
 (Must be signed in order to participate)

Office Use	Height	Name of Horse- (Enter One Class Number Per Square Under Each Horse or Exhibitor)	Registration Number	Sex	Date of Birth	Registered Owner
Exhibitor: _____			Exhibitor: _____			
Class #s						
Exhibitor: _____			Exhibitor: _____			
Class #s						
Exhibitor: _____			Exhibitor: _____			
Class #s						
Exhibitor: _____			Exhibitor: _____			
Class #s						

**High Point Amateur (Must specify Amateur AMHA Pointed Classes)**

Amateur \_\_\_\_\_ Horse \_\_\_\_\_ Classes \_\_\_\_\_  
 Amateur \_\_\_\_\_ Horse \_\_\_\_\_ Classes \_\_\_\_\_

**High Point Youth (All Youth Classes Qualify)**

Youth \_\_\_\_\_ Horse \_\_\_\_\_ Classes \_\_\_\_\_  
 Youth \_\_\_\_\_ Horse \_\_\_\_\_ Classes \_\_\_\_\_

This show is approved by and conducted under the rules of the American Miniature Horse Association (AMHA). All horses entered in this show must be officially registered with AMHA. All Youth/Amateur exhibitors must provide their current (2009) Youth/Amateur number in the designated space on the front of the entry form. Show Management reserves the right to settle and determine questions, differences, and disputes arising out of or connected with or incidental to this show within the boundaries of AMHA's Show Rules. **NO LOGOS, NAMES OR OTHER IDENTIFICATION OF PERSONS OR FARMS WILL BE ALLOWED ON ANY EXHIBITOR, HORSE, OR VEHICLE IN THE ARENA.** No clients or member of a judge's family or business clients of a judge may compete as an exhibitor in a show unless the relationship is terminated at least 90 days prior to the show. Owners, Lessees and Exhibitors agree OMHCI, Payne County Expo and AMHA will **NOT** be responsible for any theft, injury or accidents in conjunction with this show.

The following must be enclosed with submitted entry forms.

1. Copy of each horse's AMHA registration papers (front and back)
2. Copy of Stallion Inspection Certificate on Senior Stallions
3. Copy of current (2009) AMHA Youth/Amateur Card
4. Check for monies due. Make checks payable to OMHCI.

**NOTE: Entries that are received without these items will not be eligible for pre-assigned stalls. Post-entries will be accepted up to 30 minutes before the beginning of the show on Saturday, May 23 and Sunday, May 24. Entries postmarked after May 13, 2009, will be charged at the late fee rate noted below and they will not be eligible for flat fee rates. All horses will be required to have a Negative Coggins within 12 months and health certificate within 30 days.**

**Refund Policy-** A full refund will be given if entries are cancelled in writing before the closing date of pre-entries. If entries are cancelled in writing and accompanied by a veterinarian's certificate of inability to show after the closing date of pre-entries, but before the official start of the show, all fees other than the stall and office fees will be refunded. After the official start of the show, there will be no refunds. Substitution of a horse will be accepted with no late fee.

**SEND COMPLETED ENTRY FORMS TO: Ruby Priore, OMHCI Show Manager, 41691 W. Hwy. 16, Bristow, OK 74010.** Other contact information: Phone: (918) 367-5035 Fax: (918) 367-5143 Email: [pintohorselady@yahoo.com](mailto:pintohorselady@yahoo.com)

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**COMPLETE THE FOLLOWING**

Entries and Stalls

-Open Classes _____ @ \$40 per class or \$45 per class after 5/13	\$ _____
-Open Flat Fee (one exhibitor and one horse) ___ @ \$180 for up to six classes	\$ _____
-Additional classes with Flat Fee for one open exhibitor and one horse ___ @ \$40 per class	\$ _____
-Amateur Classes _____ @ \$25 per class or \$30 per class after 5/13	\$ _____
-Amateur Flat Fee (one amateur and one horse) _____ @ \$110 for up to six classes	\$ _____
-Additional classes with Flat Fee for one amateur and one horse _____ \$25 per class	\$ _____
-Youth Classes _____ @ \$15 per class or \$20 per class after 5/13	\$ _____
-Youth Flat Fee (one youth and one horse) _____ @ \$60 for up to six classes	\$ _____
-Additional Classes with Youth Flat Fee for one youth and one horse _____ @ \$15 per class	\$ _____
Stalls _____ @ \$35 per stall	\$ _____
(No more than two horses per stall; two year old and older stallions must be stalled separately)	
(Please stall near _____)	
(Please check if you wish to be stalled near a person/farm to receive mentoring.) _____	
Shavings (pre-purchased shavings will be placed in or near assigned stalls) _____ @ \$7 per bag	\$ _____
Ground/Trailer Fee (for horses not stalled) _____ @ \$15 per horse	\$ _____
Office Fee (includes AMHA surcharge) _____ @ \$9 per horse	\$ _____
RV Hookup _____ @ \$10/night	\$ _____
Class Sponsorship _____ @ \$10 per class	\$ _____
Grand and Reserve Grand Sponsorship _____ @ \$20 per division	\$ _____
Supreme Sponsorship _____ @ \$30	\$ _____
High Point Amateur Sponsorship _____ @ \$25	\$ _____
Youth High Point Sponsorship _____ @ \$25	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

All sponsors names will be announced during the show, and they are welcome to present the designated ribbon or award.  
 I plan to arrive on (give date and approximate time) \_\_\_\_\_  
 In case of emergency, I can be reached at (phone) \_\_\_\_\_ Hotel/Room \_\_\_\_\_  
 Please note any special requests here. \_\_\_\_\_

**--WE WELCOME ALL EXHIBITORS WITH SPECIAL NEEDS--**