

ONLY ONE HORSE PER FORM										2019																			
OWNER OR AUTHORIZED AGENT										OCHSA CHAMPIONSHIP										TRAINER									
NAME OF OWNER:										HORSE SHOW										NAME OF TRAINER:									
										Rancho Mission Viejo Riding Park										(Do not use barn name please)									
ADDRESS:										October 24th - 27th, 2019										ADDRESS:									
CITY/STATE/ZIP:										To reserve tack rooms, stalls & shavings contact Marcella Croopnick										CITY/STATE/ZIP:									
PHONE: ( )										949-230-0790										PHONE: ( )									
CELL: ( )										Entry deadline Friday, October 18th, 2019										CELL: ( )									
SOCIAL SECURITY #:																				SIGNATURE: X									
SIGNATURE: X																													
Entry #	NAME OF HORSE				AGE	COLOR	SEX	HT.	NAME OF RIDER				Riding Age	CLASS NUMBERS				FEES											
Address of Rider 1:																													
Address of Rider 2:																													
Every entry shall constitute an agreement and affirmation that the person making it, owner, lessee, trainer, manager, agent, coach, driver, rider and the horse: (1) shall be subject														Stall/Tack Room Fee \$275.00				\$											
to the local rules of the show, (2) that every horse, rider, and/or driver is eligible as entered; (3) that the owner and any of its representatives are bound by the rules of the show														Nomination Fee \$60.00				\$											
and will accept as final the decision of the hearing committee on any question arising under said rules and agree to hold the show, their officials, directors and employees harmless														Facility Fee \$50.00 (includes sterilization/manure removal)				\$											
for any action taken; (4) that the owner rider/driver and any of their agents or representatives agree to hold the show and their officials, directors, employees and agents harmless														Medical Service fee \$25.00 (per Rider)				\$											
for any injury or loss suffered during or in connection with the show, whether or not such injury or loss resulted directly or indirectly from negligent acts of said officials, directors,														CFDA Mandatory drug fee \$5.00				\$											
employees or agents of the show.														OCHSA assessment \$10.00				\$											
I agree to indemnify and save harmless OCHSA, Blenheim Facility Management, Rancho Mission Viejo Rdling Club, Santa Margarita Co., Rancho Santa Margarita Co.,														Non Stabling Fee \$75.00 (horses not stabled on the facility)				\$											
Rancho Mission Viejo, LLC and all subsidiaries, affiliated or associated co., corporations, entities or organizations as may now or hereafter be considered that own, are related														Haul In fee \$60.00 per day				\$											
to or manage the property owned by such entities. I agree to indemnify and save harmless the agents and employees of Orange County Horse Show Association, Inc and singular,														Ticketed Warm Up Fee Per Round \$25.00 (not Thursday)				\$											
the directors, officers, agents thereof from and against any and all loss, costs or expenses or any claim thereof, of whatever nature arising or to arise for and on account or														Shavings per bag TBA				\$											
by any reason of the entity or entities hereby made.														OCHSA 2020 Membership \$60.00 (if purchased by 10/27)				\$											
I hereby represent and agree that in the event that the entries hereby made for an on behalf of an exhibitor under the age of 18 years, that I am one of the parents of such minor,														OCHSA 2019 Membership \$60.00				\$											
or duly appointed legal guardian of such minor, and as such, entitled to make this entry for and on behalf of such minor, and I further hereby represent and agree that in the event														RV Fee \$350.00				\$											
that the entry hereby made for an on behalf of another person other than a minor under the age of 18 years; I have full authority and privilege from such person to make such																		\$											
entry for and on behalf of such other person.																													
														TOTAL ENCLOSED:				\$											
Rider 1													Circle 1 please: Visa - Mastercard - AMEX																
X									Please Stable with:				Name on Card:																
Rider 2													Phone # of card holder:																
X													Exp: Sec. Code Billing Zip Code:																
SIGNATURE OF EXHIBITOR OR PARENT/GUARDIAN OF MINOR														Card # Sec. Code															
EXHIBITOR, ALL RIDERS OR THEIR PARENT/GUARDIAN MUST SIGN														Authorized Signature															
MAKE CHECKS PAYABLE TO: OCHSA, Inc.														A non-refundable payment for \$275.00 stall fee & \$60.00 nomination fee (total \$335.00) must accompany each entry form to secure reservation.															
Mail entries to:																													
OCHSA Inc.																													
P.O. Box 80805																													
Rancho Santa Margarita, CA 92688																													