



State Games of America Horse Show
 at Liberty University
 July 27, 2019



Horse's Show Name: _____
 Owner: _____

Rider 1 Name: _____ Jr ___/Am / Pro
 Please Print Age, Circle one

Classes Entered:

Rider 2 Name: _____ Jr ___/Am/ Pro
 Please Print Age, Circle one

Classes Entered:

Emergency Contact Name: _____
 Phone Number: _____

Owner or Agent (MANDATORY)

Signature: _____
 Print Name: _____
 Address: _____

 Cell: _____
 Email: _____

Rider #1 (MANDATORY)

Signature: _____
 Print Name: _____
 Address: _____

 Cell: _____
 Email: _____

Trainer (MANDATORY)

Signature: _____
 Print Name: _____
 Address: _____

 Cell: _____
 Email: _____

Rider #2 (MANDATORY)

Signature: _____
 Print Name: _____
 Address: _____

 Cell: _____
 Email: _____

| | |
|--|--|
| Number of Stalls Requested: _____ # of Days @ \$25/night (Stalls will be bedded upon arrival) | |
| Total Amount for Classes @ \$20 each # of Classes: _____ | |
| Total Due: | |

CHECKS PAYABLE TO: LIBERTY UNIVERSITY EQUESTRIAN
 For questions, please contact equestriancenter@liberty.edu