

# WINTERHORSE PARK ICELANDIC HORSE FARM~2010 SUMMERMOT~

Judges Meeting June 17<sup>th</sup> 3:00 pm, Competition Sat. & Sun. June 19<sup>th</sup>, 20<sup>th</sup>, 10:00am

ENTRY NUMBER: \_\_\_\_\_

ENTRY FORM (ONE ENTRY FORM PER HORSE or entry form will not be accepted)

Full Name of Horse \_\_\_\_\_ Stallion \_\_\_\_\_ Mare \_\_\_\_\_ Gelding \_\_\_\_\_  
(please check one)

Color of Horse \_\_\_\_\_ Birth Year \_\_\_\_\_ USIHC or FEIF Reg. No. \_\_\_\_\_

Name of Owner of Horse only \_\_\_\_\_

Address of Owner \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Rider only \_\_\_\_\_

Address of Rider \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please fill in class numbers you would like to enter **with the above horse only.**

(please use pen and print clearly)

**!!!! NOTE: ALL ENTRIES MUST ATTACH A COPY OF THE USIHC OR OTHER FEIF RECOGNIZED REGISTRY CERTIFICATE. ENTRIES RECEIVED WITHOUT A COPY OF CERTIFICATE OF REGISTRATION WILL BE RETURNED!!!!**

Please register the above horse for the following classes:

Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_

Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_

Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_ Class # \_\_\_\_\_ Fee \$ \_\_\_\_\_

I have registered for \_\_\_\_\_ Classes at \$25 = \$ \_\_\_\_\_

I have registered for \_\_\_\_\_ Classes at \$40 = \$ \_\_\_\_\_

I have registered for \_\_\_\_\_ Classes at \$50 = \$ \_\_\_\_\_

(Date of Arrival: \_\_\_\_\_ Date of Departure: \_\_\_\_\_)

**STABLING RESERVATIONS: *please see separate form included with evaluation stabling.***

Sponsorship Per Class \_\_\_\_\_ Classes sponsored at \$50 ea. \$ \_\_\_\_\_

I am entering with an Icelandic Horse but:

I am not a member of the U.S. Icelandic Horse Congress + \$25 \$ \_\_\_\_\_

My Icelandic Horse is not registered with the USIHC + \$25 \$ \_\_\_\_\_

Enclosed please find check no. \_\_\_\_\_ in the total amount of . . . . . \$ \_\_\_\_\_

There will be a \$35 charge for any returned checks.

X \_\_\_\_\_ Phone number: \_\_\_\_\_

Authorized Signature

\_\_\_\_\_ E-mail: \_\_\_\_\_

Print Name

**Registration DEADLINE must be received no later than June 1<sup>st</sup> 2010. Late or incomplete service fee of \$25 will be charged if received after deadline.**

**DO NOT SEND CASH.** Make checks payable and mail to: Winterhorse Park LLC  
c/o Barbara Riva  
S75 W35621 Wilton Rd  
Eagle, WI 53119

OWNER OF HORSE will be responsible for any payments owed due to class changes, additional stalls, etc. All entry forms must be signed and accompanied by a check and copy of registration certificate or the entry form will not be accepted. Current Coggins required for all horses and current Health Certificate required for all horses outside of Wisconsin along with intrastate Health Certificate to travel (Minnesota travelers excluded from Health Certificate). All riders must wear approved Helmets. **All fees must be paid on full by June 20, 2010 before departing from show grounds.**