

Governor General's Cup & Lieutenant Governor General's Cup

Featuring 4-year-old Canadian Showcase
Royal Canadian Riding Academy, Cedar Valley ON, October 10th

Closing Date: Oct 3rd *NO FAX ENTRIES* Mail entries c/o Michael Ward, 154 Parkinson Cres Orangeville ON L9W 6X3

Name of Owner: _____

Address: _____

Telephone: _____ Email: _____

Owner's OE#: _____ or Personal Liability Insurance Policy# _____

Handler's Name: _____ Handler's OE#: _____

Rider's Name: _____ Rider's OE#: _____

Name of Horse: _____

Breed & Registration #: _____

Sex: _____

Date of Birth: _____ Breeder: _____

Sire: _____ Dam's Sire: _____

Class: Oct 10/21 GG LG 4-year-old Showcase



PLEASE NOTE

Drug testing may be applied as outlined in the General Rules & Regulations of the RAWF competition book.

FEE	QUANTITY	TOTAL
Class Entry \$85		
Post Entry after closing date \$175		
Stall per day \$60		
Shavings per bag \$10		
Admin fee per horse \$30		
Payment Information: Cheque payable to: CSHA – Ontario Chapter, E-transfer to csha@canadian-sport-horse.org, or by Credit Card below	Subtotal	
	HST# 124664186 + 13%	
	Grand Total	
Name on Credit Card: _____		
<input type="checkbox"/> Visa <input type="checkbox"/> MC CC#: _____		
Expiry: / /		Signature: _____

I hereby give permission to the Canadian Sport Horse Association (CSHA) to use my name, horse ownership details and/or a photo of myself and/or my horse in conjunction with a CSHA event being reported in the CSHA newsletter, and in articles or reports of activities used in radio, newspapers, CSHA website, or other media which may be utilized by the CSHA for publicity or communications purposes. *Check the box below if you do not wish to give permission.*

Initials: _____ *Opt out*

The organizers/volunteers of the Canadian Sport Horse Association or the Ontario Chapter of the CSHA will not be held responsible for any accident, loss, death or injury to persons, horses or properties of exhibitors or spectators while attending the above show.

Name: _____

Date: _____

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STALLS ARE \$60 PER DAY
(overnight is considered 2 days)

Name of Owner:

Address:

Telephone:

Email:

NAME OF HORSE(S)

NAME OF HORSE

DATES REQUIRED

STABLING INSTRUCTIONS (i.e. Stabling with someone, or stallion)

FEES please carry forward to the Entry Form

TOTAL STALLS
(\$60 per stall, per day – overnight is considered 2 days)

TOTAL SHAVINGS
(\$10 per bag)