



# SNHSA Benefit Show registration

includes Challenge Cup & Speed Derby

@ Pair of Aces Stables, Silver Circle Ranch

3400 Holcomb Ranch Ln., Reno, NV 89511 Phone: (775) 220-2270

**Saturday & Sunday, July 9-10, 2022**

(pre-registration deadline **Wednesday, July 6, 2022, 7 p.m.**)

**DO NOT MAIL OR DROP OFF ENTRIES! ACCEPTING ONLY EMAIL ENTRIES at [susanhowe@gmail.com](mailto:susanhowe@gmail.com)**

(Numbers will not be given without cash or open check provided at the show)

HORSE #

\*Required items (One registration form per RIDER)

\*Red lined required sections must be completed.

<b>Horse:</b>	<b>Owner:</b>	<b>Trainer:</b>	<b>SNHSA #:</b>
<b>Rider:</b>	<b>SNHSA #:</b>	<b>Phone:</b>	<b>Email:</b>
<b>Address, City, State, Zip:</b>		<b>*If 2 riders, please list 2nd rider name here:</b>	
<b>*Cell Phone:</b>		<b>*Email:</b>	
<b>(A Separate Registration Form is Required per Rider)</b>			

**Classes Entered (horses/ponies may not enter and show in more than 6 classes in a day):**

<b>List Saturday class numbers:</b>	<b>List Sunday class numbers:</b>
<p><i>Please leave an open, signed check, payable to SNHSA</i></p> <p>\$30 Thursday Schooling Fee \$30 = _____</p> <p>Classes \$35 x _____ = _____</p> <p>Warmup Round \$30 x _____ = _____</p> <p>Late fee for post registration entry \$50 = _____</p> <p>Challenge Cup entry** \$100 per rider = _____</p> <p>Speed Derby entry** \$50 per rider = _____</p> <p>\$10 SNHSA/USHJA Horse Fee \$10 = _____</p> <p>\$25 Non-Member Fee for Benefit Show \$25 = _____</p> <p>\$25 Non-Compete horse fee \$25 = _____</p> <p>Other _____</p> <p><b>Total due to SNHSA \$ _____</b></p> <p><small>**A separate registration form is required for Challenge Cup and Speed Derby entries, noting team name, Team riders and fence height for each. A Challenge Cup Bios for each rider is also required</small></p>	
<p><b>Payment information:</b></p> <p>Cash amount \$ _____</p> <p>Check amount \$ _____ Ck # _____</p> <p><b>Total paid \$ _____</b></p> <p><i>SNHSA fees may be paid through PayPal when closing out show account, in front of show secretary and provide visual proof of payment.</i></p> <p>PayPal account is: <a href="mailto:snhsa.treasurer@gmail.com">snhsa.treasurer@gmail.com</a></p> <p>Total due: _____</p> <p>add 4% convenience fee: _____</p> <p><b>Total paid through PayPal: _____</b></p> <p>verified by: _____</p> <p>Rider split notes:</p>	

I, the undersigned, acknowledge that as a rider/competitor, I am subjecting myself to certain inherent risks of injury or damage to either horse, rider or equipment. Knowing these facts, I nevertheless, in consideration of you accepting me as a competitor, do hereby for myself, my heirs, executors and administrators, agree to waive, release and hold harmless Pair of Aces Stables, Silver Circle Ranch, SNHSA, their employees, agents or representatives paid or unpaid, from any accident, death, injury, damage or theft that might occur to me, my horses, family, friends or personal property while at Silver Circle Ranch. I have read the above statement and understand my rights.

**I HAVE READ THE ABOVE STATEMENT AND I DO UNDERSTAND MY RIGHTS THEREOF.**

Signature of Rider #1 \_\_\_\_\_ Date \_\_\_\_\_

Signature of Rider #2 \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/guardian #1 \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/guardian #2 \_\_\_\_\_ Date \_\_\_\_\_