

# JULY JUMPER JAM

Entries Due By:  
7/3/2017

MJHA Rated Jumper Show  
Saturday July 8, 2017



Rider Name:	Phone:	Rider MHJA#:
Address:	City, State, Zip:	Email:

Please complete each area for horse / rider combination

Horse (1):	Horse MHJA#:
Horse Owner:	
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #

Horse (2):	Horse MHJA#:
Horse Owner:	
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #
CLASS #	CLASS #

	# ENTRIES	AMOUNT
NUMBER # OF CLASSES	@\$20.00 / Class	
MHJA DRUG FEE MANDATORY	@ \$2.00 / Horse	
MHJA NON-MEMBER FEE	@ \$15.00 / Rider	
GROUNDS FEE	@ \$15.00 / Horse	

Send Entries To:

**TOTAL DUE**

**PEACEFUL BAY STABLES**

Pay by Check to: **PEACEFUL BAY STABLES**

PO Box 1054



Or Pay by Credit card

Lakeside MT 59922

Phone: (406) 844-2332 Fax: (406) 752-7628

Email: [peacefulbaystables@gmail.com](mailto:peacefulbaystables@gmail.com)

Name on Card: _____
Card # _____
Expire Date: _____ CVV Code : _____

The signing of this entry form signifies the release of the Peaceful Bay Stables, MJHA and its Board of Directors, as well as show management, officials and volunteers from any liability or responsibility for any injury or damage to any horse, rider, other individual or property before, during and following this show. Rider and Owner acknowledge that they are participating at their own risk.

\_\_\_\_\_  
SIGNATURE OF RIDER / GUARDIAN

\_\_\_\_\_  
SIGNATURE OF GUARDIAN if Rider is Under 18

\_\_\_\_\_  
SIGNATURE OF OWNER OF HORSE (1)

\_\_\_\_\_  
SIGNATURE OF OWNER OF HORSE (2)

\*\*\*OFFICE USE ONLY\*\*\*

RIDER#	MHJA#	Signatures	Amount Paid	Amount Owed	CHECK # OR CREDIT CARD Confrim #