

**ONLY ONE (1) OWNER PER FORM**

OWNER	
Print Name of Legal Owner	
Street or P.O. Box of Owner or Agent	
City	State Zip
Phone No. of Owner	Owner Email Address
USEF #	IALHA #
PFHA #	IFSHA #

**ANDALUSIAN / LUSITANO,  
FRIESIAN, PASO FINO,  
OPPORTUNITY AND  
CARRIAGE ONLY ON THIS FORM**

**2011 Fiesta Charity  
Horse Show**

**May 4 – 8, 2011  
Los Angeles Equestrian Center  
Burbank, California**

**COMPLETE BOTH SIDES OF THIS FORM**

**ENTRIES CLOSE APRIL 22, 2011**

TRAINER	
Print Trainer's Name	
Street or P.O. Box of Trainer	
City	State Zip
Phone No. of Trainer	Trainer Email Address
USEF #	IALHA #
PFHA #	IFSHA #

LEAVE BLANK	NAME OF HORSE (Class Number Under Name. One Class Per Square)	TOTAL FEES	BREED REG # & USEF REC #	RIDER, DRIVER OR HANDLER (Provide address and assoc. #'s on reverse)
			BREED REG#	NAME:
			USEF REC#	
			BREED REG#	NAME:
			USEF REC#	
			BREED REG#	NAME:
			USEF REC#	
			BREED REG#	NAME:
			USEF REC#	

**PLEASE SEND COPIES OF HORSE REGISTRATION PAPERS SHOWING PROOF OF OWNERSHIP, USEF, IALHA, PFHA AND IFSHA MEMBERSHIP CARDS, AS APPLICABLE, WITH THIS ENTRY FORM.**

CREDIT CARD PAYMENT INFORMATION	
Name as it appears on card	
Card Number / Type	
Exp. Date	Billing Zip Code
3 digit security code	
Cardholder's Signature	
Note – 3% transaction fee to be applied	

Make All Checks Payable To:  
**FIESTA OF THE SPANISH HORSE**

All Entries must include complete payment by check or Credit Card Authorization (VISA, MC, DISCOVER, AM EXP)  
Open checks will be processed upon receipt.

An Open Check or Credit Card Authorization must be provided to show office prior to issuance of back numbers.

**FOR MORE INFORMATION CALL:  
ROXANNE HOOD (831) 637-8510**

MAIL ENTRIES TO:  
**Fiesta of the Spanish Horse  
Attn: Roxanne Hood  
PO Box 21022  
Glendale, CA 91221-5122**

ENTRY FEES..... \$ \_\_\_\_\_  
 POST ENTRY FEE (PER HORSE – SEE RULE 15) ..... ( ) x \$ 25 \$ \_\_\_\_\_  
 OFFICE FEES (PER HORSE) ..... ( ) x \$ 15 \$ \_\_\_\_\_  
 STALLS / TACK ROOMS, NO FIRST BEDDING – 5 DAYS ..... ( ) x \$ 135 \$ \_\_\_\_\_  
 GOLD & ABOVE SPONSORS ONLY – 5 DAYS ..... ( ) x \$ 90 \$ \_\_\_\_\_  
 STALLS / TACK ROOMS, NO FIRST BEDDING – 3 DAYS ..... ( ) x \$ 90 \$ \_\_\_\_\_  
 PLEASE SPECIFY WHICH 3 DAYS STALLS NEEDED \_\_\_\_\_  
 EARLY ARRIVALS (PER DAY, PER STALL)..... ( ) x \$ 30 \$ \_\_\_\_\_  
 GROUNDS FEE (per horse, per day & LAEC horses not requiring stalls)( ) x \$ 35 \$ \_\_\_\_\_  
 CA DRUG FEE (PER HORSE) ..... ( ) x \$ 5 \$ \_\_\_\_\_  
 USEF FEE \$15/horse (\$7 drugs/meds; \$8 USEF)..... ( ) x \$ 15 \$ \_\_\_\_\_  
 USEF NON-MEMBER FEE-(PER PERSON) ..... ( ) x \$ 30 \$ \_\_\_\_\_  
 IALHA NON-MEMBER FEE (PER HORSE/EXHIBITOR)..... ( ) x \$ 25 \$ \_\_\_\_\_  
 IFSHA NON-MEMBER FEE (PER NON-OWNER PARTICIPANT).... ( ) x \$ 25 \$ \_\_\_\_\_  
 PASO FINO FEE (PER HORSE)..... ( ) x \$ 6 \$ \_\_\_\_\_  
 CLASS SPONSOR (\$50 regular - \$100 Champion)..... \$ \_\_\_\_\_  
 \$25 Direct Donation to Cancer Research (Optional)..... \$ 25 \_\_\_\_\_  
 RV Vehicles (per day) ..... ( ) x \$ 55 \$ \_\_\_\_\_  
 TOTAL ENCLOSED ..... \$ \_\_\_\_\_  
 STABLE WITH \_\_\_\_\_ ARRIVAL DATE \_\_\_\_\_

