



FARM TEAM

Payment:	Office Use Only:
Ck# _____	Amount: _____
CC- last 4 digits _____	Amount: _____
Postmark Date: _____	
Assigned Number: _____	Group Assignment: _____

ONE OWNER PER ENTRY FORM

PERSON RESPONSIBLE FOR PAYMENT _____

Owner & Hitch Name _____ Breed _____

Email Address _____

Complete Mailing Address _____

City/State/Zip _____ Phone _____

Name & Phone # Number of Contact Attending Show _____

MANDATORY INFORMATION:

<u>Class Name</u>	<u>Owner</u>	<u>Driver's Name</u>	
Ladies Cart*			\$10.00
Men's Cart*			\$10.00
Amateur Cart			\$10.00
Show Hitch Team			\$10.00
Ladies Team			\$10.00
Unicorn Hitch			\$10.00
Four Horse Hitch			\$10.00
Cart Classic Series			\$10.00
Farm Team Log Skid			\$20.00
Farm Feed Team			\$15.00
Working Horse Team			\$10.00

*The same horse may not be used for both Men's & Ladies Cart

** If entering this class you must send a copy of your Membership with your entries. You must enter both classes.

TOTAL ENTRY FEES: _____

WARNING: Under Colorado law, an equine professional is not liable for an injury to or the death of a participant in the equine activities resulting from the inherent risks of equine activities, pursuant to section 13-21-119 Colorado Revised Statutes.

STALLING & RV FORM - Limited Stall Availability - Please Call

Please list all owners/exhibitors who wish to be stalled together. We will make every effort to accommodate you., but no guarantees are made. Stalling requests will be based on the date stall reservations and complete payment is received.

Owner/ Hitch Name _____

Arrival Date _____ Departure Date _____

You Must Have the same number of stalls pre/post show as during the show.

Stalls	# Nights	# Stalls	Rate	Total Cost
Early Arrival Stalls (Jan 7-16)	_____	x _____	x \$ 12.50 ea	= _____
During Show:				
Horse Stalls (Jan 17-20) \$50/stall	n/a	_____	x \$50.00 ea	= _____
Tack Stalls (Jan 17-20) \$40/stall	n/a	_____	x \$40.00 ea	= _____
BTDHS to NWSS (Jan 21-22)	_____	x _____	x \$ 12.50 ea	= _____

Shavings	# Bags	Rate	Total Cost
Pine Shavings - Pre Bed \$7 per bag	_____	x \$ 7.00 ea	= _____

RV - Power Hookup Only No water hook-up available	# Nights	Rate	Total Cost
20 amp \$20/night	_____	x \$20.00	= _____
30 or 50 amp \$20/night	_____	x \$20.00	= _____

Office Fee \$20.00

Entry Fee Total from first page _____

Total Costs to be paid with Entries _____

There are (8) stalls to a row. How many tack stalls would you like taken down in the front of your aisle (if any): _____

Other Special Requests: _____

Make checks payable to: Big Thunder Draft Horse Show c/o The Ranch

Mailing address: 5280 Arena Circle, Loveland, CO 80538

Payable online at treventscomplex.com/plan-your-visit/payment-portal (MC, Visa, American Express and Discover) or call (970) 619-4014

Premium Check Payable To _____

******* A completed W-9 form must be filled out in the name of the person receiving the premium check. Without a completed W-9 form, no premium check will be sent. The premium check will only be payable to the person or company on the W-9 form. This applies to Farm Teams as well!**

Please Provide information on your hitch for the Announcer and Program.

Any photos can be emailed to Laura-amesla@larimer.org or gwyscaver@larimer.org



Name: _____

Hometown: _____

Information (short paragraph):

If you would like us to use the same information from last year please denote that.

STATEMENT OF RESPONSIBILITY: I agree to exhibit the above horse at my own risk and subject to all rules and regulations of the Big Thunder Draft Horse Show, the premium list, ground rules of the Show and approving organizations. I further agree that if I suffer personal injury and/or damage or loss occurs to me or my vehicle or equipment I may send with my horse ,I will not hold the Big Thunder Draft Horse Show, Larimer County, The Ranch, show management or any other persons connected with this show responsible, nor will make claim against them.

Owner or Agent Signature: