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# Maine Trail Riders Association

## FALL FUN SHOW

MTRA CLUB HOUSE: 6 TUTT LANE, LITCHFIELD

**JUDGE: JESS SMALL**

SHOW STARTS AT 9:15 a.m.

**ONE DAY PRE-ENTRY (4 Days Prior): ONE DAY ENTRY FEE!! Members \$35 NON-MEMBERS \$45 FAMILY \$75**

**PER CLASS PRE-ENTRY:(4 Days Prior) Members \$8/CLASS and non-members \$10/CLASS  
PER CLASS POST ENTRIES \$15/CLASS**

Please make CHECKS PAYABLE TO: MTRA. **There WILL Be a \$25 return CHECK Fee FOR ALL returned CHECKS**

#	RIDER'S NAME	HORSE/PONY Name	RIDER'S AGE 1/1/2021	OWNER'S name	OWNER'S ADDRESS	
	Rider's Address	Western / English				
		PHONE:		Vet docs rec'd: Y N		
				Coggin Date:		
	E-mail:			Rabies Date:		
Class #	<b>1 2 3 4 5 6 7 8 9 10 11 12 13</b> <b>14 15 16 17 18 19 20 21 22 23</b> <b>24 25 26 27 28 29 30 31 32</b>					
		Member? Y N		Paying: Per Class	All Day Flat Fee	Pre-Reg Family Flat Fee
	<b>Total # Classes _____</b>	Pre-Registered? Y N				Subtotal:
						Office Fee per rider \$5
						Number Deposit per rider \$5
						TOTAL DUE:
	PAID? Y N	PAYMENT METHOD:	CASH	CHECK	CHECK #	

Please, send copies of current coggins test and rabies to keep on file.

I hereby certify that every horse, rider and handler is eligible as entered and I agree to be bound by the by-laws and rules of the Maine Trail Riders Association. I further agree that if any damage or loss occurs to any of the horses or property which I may send to the show, that I will make no claims therefore. I further agree to indemnify and hold harmless the show committee and all the horse show officials Against all claims, demands, suits, and expenses arising out of any injury to any person or animal or to any property caused by myself, my attendant, or my animal.

MAIL ENTRY FORMS TO:

Trudy Bickford: 36 Old Portland Rd  
Auburn, ME 04210

Entries may also be emailed to:

[trudybickford@mainetrailriders.com](mailto:trudybickford@mainetrailriders.com).

\*\*\*All preregistrations are due **OCTOBER 20th**\*\*\*

Signature of Exhibitor: \_\_\_\_\_ Signature of Parent or Guardian if a minor: \_\_\_\_\_

MeTRA Use Only: Date Received: \_\_\_\_\_ Paid: Y: \_\_\_ N \_\_\_ How \_\_\_\_\_ CHECK # \_\_\_\_\_

Owner Member: \_\_\_Yes \_\_\_ No      Rider member: \_\_\_Yes \_\_\_ No