

# Montgomery County Equine Club Open Gymkhana

NYSSHA Pointed **\*\*Saturday, June 17, 2017\*\***

An Electric Timer will be used



(number assigned)

Classes will not start before 4PM in the indoor arena

**Big O**

1. Leadline 2. W/T 3. Pee Wee 4. Junior 5. Senior 6. Jack Benny

**Botwie**

7. Leadline 8. W/T 9. Pee Wee 10. Junior 11. Senior 12. Jack Benny

**Barrel Race**

13. Leadline 14. W/T 15. Pee Wee 16. Junior 17. Senior 18. Jack Benny

**Twister**

19. Pee Wee 20. Junior 21. Senior 22. Jack Benny

**Pole Keyhole**

23. Pee Wee 24. Junior 25. Senior 26. Jack Benny

**Pole Bending**

27. Pee Wee 28. Junior 29. Senior 30. Jack Benny

\*\*\*\*\* Dress code:

Boots, Western  
Shirt and Hats or  
Helmets required

\*\*\*\*\*Riders May Not Cross Enter Divisions\*\*\*\*\*

**Name of Horse**                      **Age**                      **Sex**                      **Breed**                      **Color**

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\*\*\*\*ASTM helmets  
required to be worn by  
all exhibitors under the  
age of 18

**Name of Rider**    **Age as of Jan. 1, 2017**

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**Leadline Classes (age 3-8): W/T ONLY      6 Ribbons**                      \$2.00 X \_\_\_\_\_ = \_\_\_\_\_

Class number:    1    7    13    Whole LL Division=\$5.00=\_\_\_\_\_

**W/T Classes (all ages) WALK/TROT ONLY      6 Ribbons**                      \$3.00 X \_\_\_\_\_ = \_\_\_\_\_

Class number:    2    8    14    Whole W/T Division=\$7.00=\_\_\_\_\_

**Pee Wee Classes (age 11 & under):              6 Ribbons**                      \$3.00 X \_\_\_\_\_ = \_\_\_\_\_

Class number:    3    9    15    19    23    27    Whole PW Division=\$15.00=\_\_\_\_\_

**Junior Classes (age 17 & under):              6 Ribbons**                      \$4.00 X \_\_\_\_\_ = \_\_\_\_\_

Class number:    4    10    16    20    24    28    Whole Jr. Division=\$20.00=\_\_\_\_\_

**Senior & Jack Benny Classes:      Payback: 50% of entry fees taken in paid back at**

**1st-40% 2nd-30% 3<sup>rd</sup>-20% 4th-10%      No Ribbons**

Class number:    5    6    11    12    17    18    21    22    \$7.00 X \_\_\_\_\_ = \_\_\_\_\_

25    26    29    30

**\*\*Coggins and Rabies certificates must accompany all entries\*\***

**Release:** The undersigned hereby acknowledges that s/he is fully aware that participation in a horse show or other equine event involves inherent risk of injury due to the behavior of animals involved and natural conditions. The undersigned hereby waives the right to institute a lawsuit for damages against or to recover damages from the New York State Saddle Horse Association, the Fonda Fairgrounds and any member club based on any injury that occurs due to such inherent risk. The undersigned also affirms that s/he is solely responsible for choosing and maintaining the horse and equipment that the undersigned uses and that the undersigned waives any claim for damages against the New York State Saddle Horse Association, the Fonda Fairgrounds and any member club based on any injury that occurs due to the behavior of any animal that participates in a horse show sponsored by the New York Saddle Horse Association or any member club or due to an equipment failure or defect. The undersigned further acknowledges that the New York State Saddle Horse Association, the Fonda Fairgrounds and any member club are not responsible for the conduct of other participants in such horse show and their animals and hereby waives any claim for damages against the New York State Saddle Horse Association, the Fonda Fairgrounds and any member club based on an injury that occurs due to the conduct of another participant in such event or another participants animal.

Unstabled Fee (\$5/day): \_\_\_\_\_

Stabled Fee (\$15/day or \$25/weekend): \_\_\_\_\_

Office Fee: \_\_\_\_\_ **\$2.00**

Timer Fee: \_\_\_\_\_ **\$2.00**

Camper Fee(\$20/ night): \_\_\_\_\_

**Total Fees:** \_\_\_\_\_

**make checks payable to:  
Mont. Co. Equine Club**

**Entries accepted day of show or  
Mail pre-entries by 6/10/17 to:**

Deb Yacobucci  
306 Dillenback Rd.  
Palatine Bridge, NY 13428  
518-852-2920

Office Use  
Coggins \_\_\_\_\_  
Rabies \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Exhibitor Signature:** \_\_\_\_\_

Check \_\_\_\_\_  
Cash \_\_\_\_\_

(parent /guardian must sign if exhibitor is under 18 years of age)