

Show:

KMSHA Show Entry Form

P.O. Box 436 Irvine, KY 40336 office@kmsha.com www.kmsha.com 606-393-4111

Account:							
Email/Pho	one Number	::					
Note: One	e entry shee	et per account holder (p	erson paying bill); lis	st your back number o	of your choice and one	e will be assigned if o	luplications occur
Back #	Class #	Horse	Rider	Owner	Trainer	Responsible Party	Paybacks Distributed To

By submitting this form, you agree to abide by the rules and by-laws of the KMSHA of Kentucky, Inc. and recognize that equine activity has an inherent risk of injury and will hold the KMSHA and its officers harmless.