ENTRY BLANK FOR GRADES, YOUTH, RIDING, HITCHES & GROUPS

(Please use other side for halter horses.) - If entering Belgian Registered Mare Cart, please provide Mare Name and Reg. #

Section	Class	Exhibitor's Name

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Please list names of Showman in all Hitch, Riding and Youth Classes, so they can be in the program! Especially Youth so they may partcipate in Merit Programs

Please note the number of box stalls that an exhibitor is allowed in the pavilion.

If an exhibitor needs to alter one or more of his or her stalls during the show, management must be informed prior to doing so, and there is a charge for the pavilion staff to make these changes.

GROUPS

Section	Class	Exhibitor's Name	Name of Sire (Get of Sire) and Reg. #	Name of Dam (Produce of Dam) and Reg. #

FAXED ENTRIES WILL NOT BE ACCEPTED.

ENTRY BLANK FOR MICHIGAN GREAT LAKES INTERNATIONAL DRAFT HORSE SHOW

Halter Section	Entries Class	MI B&O	Name of Animal	Registration Number	Foaled	Name & Number

PLEASE USE OTHER SIDE FOR HITCH, GROUP, GRADE, YOUTH, AND RIDING ENTRIES

Stabling Preference: ☐ **Pavilion** ☐ **New Barn**

Per Horse Fee_____ @ $15.00 ea ..... $ _____

Number of Tie Stalls _____ @ $37.00 ea ..... $ _____

Number of Box Stalls_____ @ $50.00 ea ..... $ _____

Second Box Stall_____ @ $70.00 ea ..... $ _____

Third Box Stall _____ @ $80.00 ea ..... $ _____

Please note number of box stalls that an exhibitor is allowed. (See pages 7 & 8)

Number of Box Stalls (New Barn) _____ @ $65.00 ea ..... $ _____

Complimentary Exhibitor/Helper Passes are based on the number of horses entered. 1-4 (2 passes) 5-8 (3 passes) 9 or more (4 passes)

Extra Exhibitor/Helper Passes _____ @ $10.00 ea ..... $ _____

Camping Fees (include form on page 29) ..... $ _____

MGLI Cart Class _____ @ $100.00 ea ..... $ _____

TOTAL ENCLOSED *(U.S. Funds)* _____ ..... $ _____

SEND ENTRIES TO: DIANE WITT (Make Checks payable to: MGLI)
9753W. Lehman, DeWitt, MI 48820
Questions: (517) 204-6730 or Email dmoodymgli@hotmail.com (quickest response way)
FAXED ENTRIES WILL NOT BE ACCEPTED.

EXHIBITOR'S NAME & ADDRESS

(Horses will be listed in Horse Show Program as they appear on entry form. Premium checks will be made out to the person signing entry form.)

Farm Name (please print) _____

Exhibitor Name _____

Street or _____

City_____State/Province _____

Zip_____ Telephone (_____) _____

Email Address _____

Social Security or Social Insurance Number_____

By signing this entry form, exhibitor hereby agrees to the conditions, terms and rules set forth in this premium book and will abide by same.
Entries without telephone and social security number will not be accepted.

Signature _____

A $35.00 FEE WILL BE CHARGED ON RETURNED CHECKS.
***Please print neatly, so we can read animal's name & information.**
***Please include copy of registration papers with entries.**