

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

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

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

Section	Class	Exhibitor's Name

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 _____ @ \$50.00 ea\$ _____

Number of Box Stalls _____ @ \$100.00 ea\$ _____

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

Number of Box Stalls (New Barn) _____ @ \$100.00 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 Classic 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 _____

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.