



Class Registration Form

Name _____

Date of Birth _____ Age _____

Address _____

City, State, Zip _____

Email _____

Number of classes x \$10 = _____

Cash _____

Check _____

Please circle classes

1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25

17 and under exhibitors required to have parent/guardian's written parental permission.

Parental permission also required for 17 and under stallion exhibitors.

The undersigned acknowledges that CALLAWAY PLANTATION, it's owners, agents, or associates will not be held responsible and further release them from any liability or responsibility for accident, injury or loss to any exhibitor, person, horse or equipment occurring before or after the show. Under the Georgia Equine Act, any equine activity, sponsor or equine professional is not liable for any injury to, or death of a participant in equine activities resulting from the inherent risk of equine activities. By signing below, I acknowledge that I have read and understand all the rules and agree to abide by them.

Signature of exhibitor _____

(Parent or guardian signature if under 18)

Date _____