

ST. JOHNS COUNTY HORSE COUNCIL OPEN SHOW November 29, 2025
REGISTRATION FORM

Contestants must fill out a registration form for each rider/horse team.

Exhibitor Name _____ **High Point Division** _____

Horse's Name _____ SJCHC Member _____

Owner's Name _____ Emergency Contact Number (____) _____

Address _____

County _____ Total number of classes entered _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

Class # _____ Class Name _____

SJCHC members \$75 ALL DAY _____ -

NON-Members \$85 ALL DAY (includes Membership Fee) _____

SJCHC members \$25 per class _____

NON-Members \$35 per class (includes Membership Fee) _____

Grounds Fee \$5 _____

Total _____

Cash / Check / Charge ENTRY FEES (*make payable to SJCHC*)

- Register online @sjchc.org

- Participant Name: _____
- Signature: _____ Date: _____
- Jr. Rider's age on September 1, 2025 _____
- Legal Guardian's Name:
• _____
• _____
• (if Participant is under 18 years of age)
- Guardian's Signature: _____ Date: _____
- (if Participant is under 18 years of age)