

# TH BENEFIT HORSE SHOW



Spend the day !  
Activities for the Entire  
Family!

Lunch Available

Bring your lawn chairs.

Guests are welcome.

WATER ACTIVITIES

FACE PAINTING!



Address Correction Requested

Therapeutic Horsemanship  
332 Stable Lane  
Wentzville, MO 63385



23rd  
Annual Benefit  
Horse Show  
For  
Riders with Disabilities  
**JUNE 20, 2009**



All Proceeds Benefit the Programs of  
Therapeutic Horsemanship

Phone: 636.332.4940 (Office)

Phone: 636.332.4941 (Fax)

Email: [srafferty@thstl.org](mailto:srafferty@thstl.org)

Website: [www.thstl.org](http://www.thstl.org)

NARHA Premier Accredited Center

# CLASS LIST

*Classes may not be held in this order!*

**Division A: Walk ONLY - \$35.00**

- 1A Dressage/Jumping Obstacle/Trail-Open
- 2A Equitation - Pleasure
- 3A Game

**Division B: Minimal Trot - \$50.00**

- 4B Equitation- Minimal Trot
- 5B Dressage/Jumping Obstacle/Trail-Open
- 6B Game
- 7B Mystery Class

**Division C: Intermediate Trot - \$50.00**

- 8C Equitation-Intermediate Trot
- 9C Dressage/Jumping Obstacle/Trail-Open
- 10C Game
- 11C Mystery Class

**Division D: Advanced Trot - \$50.00**

- 12D Equitation - Advanced Trot
- 13D Dressage/Jumping Obstacle/Trail-Open
- 14D Game
- 15D Mystery Class

**The following classes are \$10.00 each**

- Class 16 UPHA Exceptional Challenge Cup\*
- Class 17 Sibling Costume Class\*\*
- Class 18 Gaitway Riders 12yrs & older, walk/trot
- Class 19 Gaitway Riders 4yrs-11yrs, walk/trot

\* Six places will qualify for the National Championship at the American Royal Horse Show, Kansas City, MO, Nov.18-20, 2009. UPHA class will follow UPHA rules.

\*\* Sibling must currently ride in program. Walk only, lead line class. Rider will be judged on originality of costume.

\*\*\*A High-Point ribbon will be given to the rider earning the most points in Equitation and Obstacle classes in each division.

Competitors may ride English, Western, or adapted saddles, bareback pads, & surcingles.

Negative Coggins required for all horses brought onto property.

**For info, please call 636.332.4940.**

# Registration Information

Closing Date - June 10,2009

## Sign-up Form

Name																													
Address																													
Rider's Age																													
Phone																													
E-mail																													
Horse's Name : (will be assigned by TH instructor)																													
<i>Method of Payment</i>																													
<input type="checkbox"/> Check	Make payable to Therapeutic Horsemanship																												
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard																												
Credit Card No.	Expire Date																												
Signature																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Class No</th> <th style="width: 60%;">Class Description</th> <th style="width: 25%;">Class Fee</th> </tr> </thead> <tbody> <tr> <td>Div. A</td> <td></td> <td>\$35.00</td> </tr> <tr> <td>Div. B, C D</td> <td></td> <td>\$50.00</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>Xtra Donation</td> <td>Thanks from TH</td> <td> </td> </tr> <tr> <td colspan="2">Subtotal Class Fees</td> <td> </td> </tr> <tr> <td colspan="2">Administrative Fee</td> <td>5.00</td> </tr> <tr> <td colspan="2">Total Class Fees</td> <td> </td> </tr> </tbody> </table>			Class No	Class Description	Class Fee	Div. A		\$35.00	Div. B, C D		\$50.00							Xtra Donation	Thanks from TH		Subtotal Class Fees			Administrative Fee		5.00	Total Class Fees		
Class No	Class Description	Class Fee																											
Div. A		\$35.00																											
Div. B, C D		\$50.00																											
Xtra Donation	Thanks from TH																												
Subtotal Class Fees																													
Administrative Fee		5.00																											
Total Class Fees																													



**Awards Ceremony at Lunch  
Presentation of the 2008 Rider of  
the Year Awards**

Agreement to Hold Harmless: In consideration of acceptance of this entry, I agree to hold harmless any directors, officers, or members of Therapeutic Horsemanship from any claim of loss or accidental injury or death which may be alleged to have been caused directly or indirectly to myself, child, or horse.

Date: \_\_\_\_\_  
Rider Signature

Date: \_\_\_\_\_  
Parent/Guardian Signature

Date: \_\_\_\_\_  
Owner Signature

**Therapeutic Horsemanship**  
332 Stable Lane  
Wentzville, MO 63385

Phone: 636.332.4940  
Fax: 636.332.4941  
Web: www.thstl.org  
E-mail: srafferty@thstl.org