The American Saddlebred Horse Association of Michigan Presents

The Crystal Horse Show

September 25-26, 2026

Shiawassee County Fair Grounds

Corunna Michigan

Entries Close: September 12, 2026

Make checks payable to: **ASHAM**

Mail Entries to:

Jenna Chaaban – C/O ASHAM

6850 Armstrong Road, Howell Mi. 48855

Online - https://horseshowsonline.com

One Owner per Entry Blank

Indicate Rider Number in ( ) for each class

Leave Blank	Horse Name	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )
	Color: Age: Sex:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	Breed	Rider 1:			
	Registration Number	Rider 2:			
Leave Blank	Horse Name	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )
	Color: Age: Sex:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	Breed	Rider 1:			
	Registration Number	Rider 2:			
Leave Blank	Horse Name	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )	Class# Rider ( )
	Color: Age: Sex:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	Breed	Rider 1:			
	Registration Number	Rider 2:			

Show Secretary: Patti Schooley

I hereby make the above entries at my own risk and will hold ASHAM, Shiawassee County Fair Grounds, their boards, members and employees collectively and individually, blameless in the event of loss, accident, or injury.

Owner Information	**Trainer Information**
Name:	Name:
Signature:	Signature:
I declare I am an Amateur Yes No	I declare I am an Amateur Yes No
Address:	Address:
City:	City:
State: Zip:	State: Zip:
	Birthdate:
Rider Information #1	**Rider Information #2**
Name:	Name:
Signature:	Signature:
I declare I am an Amateur Yes No	I declare I am an Amateur Yes No
Address:	Address:
City:	City:
State: Zip:	State: Zip:
Birthdate:	Birthdate:

	Total Entry Fees from Above	$
	Office fee @ - $20.00 per Horse	$
	Late Entry Fees - $5.00 per Horse	$
	Classes - $18.00	$
	Academy Classes - $20.00	$
	Specialty Classes & Championship Classes - $25.00	$
	Stall @ - $65.00	$
	Shavings @ - $11.00 per Bag *(payable to: ASHAM)*	$
	Camping: _____ days @ $30/Night Primitive	$
	Camping: _____ days @ $40/Night 30amp	$
	Camping: _____ days @ $45/Night 50amp	$
	Credit Card Fee 3.5%	$
Note: Returned Check Fee $60	**Grand Total**	$

Make Checks Payable to ASHAM

Check #_____ **Visa** _____ **Mastercard** _____

Card #_____

Exp. Date _____ **CVV**_____ **Billing Zip**_____

Signature:_____