

Ellie Stine Masek Clinic Registration

Event Timing: Friday Sept 26 and Saturday Sept. 27

Event Address: Sierra Del Sol Sport Horses ,685 Coyote Rd. Las Cruces, NM

Contact us at js99wilmes@gmail.com

*** Indicates required question**

Rider's Name _____ Email* _____

-Phone Number* _____

Horse's Name _____

Riding*

Traditional Dressage ____

Western Dressage _____

Choose*

Individual Ride _____ Shared Ride _____ If Shared ride Please fill out the following questions

Second Rider's Name: _____

_Second Rider's Email _____ Second Rider's Phone _____

Second Rider's Horse's name: _____

I will be riding:

Friday, September 26 ____ Saturday, September 27 _____ BOTH Friday and Saturday _____

If riding only for 1 day, which day do you prefer? (Preferred ride times and/or days are on a first come first served basis. We will do our best to give you your requested day and/or time, but it is not guaranteed)

Friday _____

Saturday _____

Comments or Questions. If you have any special requests, please enter them here

LIABILITY WAIVER I certify that I agree to abide by the PDNDS Schooling Show Cancellation Policy as follows---- No refunds after closing date or for weather or safety issues that require management to cancel classes or day(s) of competition. If the show is cancelled due to weather or safety issues, management will automatically apply the class entry fee(s) towards a subsequent PDNDS schooling show in the same calendar year. Otherwise, upon written request by the competitor to the show secretary, class entry fees will be refunded. To accommodate for work done by the show secretary and facility, office and facility fees are not refundable or usable for future shows.-----I agree to enter this schooling show at my own risk and subject to the conditions of the Paso del Norte Dressage Society. I understand that the officers and members of PdNDS, the property owner/manager and all others associated with this activity assume no responsibilities for accidents, damage, injury or illness to the horses, owners, riders, employees, attendants, spectators, or any other person or property in connection with this show. As indicated by my signature below, I hereby release the property owner, and representatives, sponsor, their officers, members and or co-sponsors of this show from any claim or right for damages which may occur to me, my property, those persons accompanying me, or my horse. I also assume and accept full responsibility for any damages done by me, my minor child, those accompanying me, or my horse at this show I agree to be bound by all applicable PDNDS rules and all terms and provisions of this entry form and all terms and provisions of the prize list. I am signing and submitting this agreement electronically. I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand. I certify that I am over 18, or that the electronic signature below is that of the parent or legal guardian of the minor competitor.

IF YOUR NAME (OR LEGAL GUARDIAN'S NAME IF COMPETITOR IS UNDER 18) IS NOT PRINTED BELOW YOUR ENTRY WILL NOT BE ACCEPTED*

I agree _____