

NO ENTRY WILL BE ACCEPTED WITHOUT COMPLETED AND SIGNED ENTRY, COGGINS AND PAYMENT.
NO PHONE ENTRIES

LENNOX DRESSAGE AT SUDDENLY FARM - SCHOOLING SHOW ENTRY FORM

*** ONE HORSE/RIDER COMBINATION PER ENTRY FORM***

SHOW DATE: _____

SECRETARY – ERIN SCALBA JOHNSON – 609-304-5804 – EMAIL – LENNOXDRESSAGE@GMAIL.COM

Venmo: @lennoxdressage

PLEASE PRINT CLEARLY

RIDER: _____ BIRTHDATE: _____

ADDRESS: _____ ZIP _____

EMAIL: _____ PHONE: _____ CELL: _____

DIVISION: STARTER RIDER STARTER HORSE OPEN JR/YR SENIOR **(CIRCLE ALL THAT APPLY)**

NAME OF HORSE: _____

BREED: _____ AGE: _____ COLOR: _____ HEIGHT: _____ GENDER: _____

OWNER'S NAME: _____ PHONE (H): _____ (CELL) _____

ADDRESS: _____ EMAIL: _____

TRAINER'S NAME: _____

CLASS NAME AND DIVISION:

FEES

SPECIAL REQUESTS

WILL BE HONORED IN ORDER OF DATE RECEIVED - IF POSSIBLE

TOTAL FEES: _____ (\$30 PER CLASS)

OFFICE FEE: _____ (\$15)

LATE FEE: _____ (\$20) – IF RECEIVED AFTER CLOSING DATE

TOTAL ENCLOSED: \$ _____

HOLD HARMLESS CLAUSE: UNDERSTANDING THAT HORSE SPORTS MAY BE HAZARDOUS AND DANGEROUS, EVEN LEADING TO PERMANENT INJURY OR DEATH, EACH OWNER, RIDER, SPECTATOR AND/OR ANY OTHER PARTICIPANT ASSUMES ANY AND ALL RISKS OR LOSS/INJURY, AND AGREES TO HOLD HARMLESS, REGARDLESS OF NEGLIGENT ACTS OR OMISSIONS, LENNOX DRESSAGE, LLC; SUDDENLY FARM, THE SCALBA FAMILY, THE STATE OF N.J., THE SHOW MANAGEMENT, THE SHOW COMMITTEE AND ALL HORSE SHOW PERSONNEL AND VOLUNTEERS.

I HEREBY ENCLOSE MY ENTRY WHICH IS MADE AT MY OWN RISK. I UNDERSTAND THAT THE ORGANIZERS, THE HOST AND THE PROPERTY OWNERS ARE NOT RESPONSIBLE FOR ANY ACCIDENTS, DAMAGE, LOSS, INJURYS, OR ILLNESS TO THE HORSES, EQUIPMENT, OWNERS, RIIERS, EMPLOYEES, ATTENDANTS, SPECTATORS, VOLUNTEERS, OR ANY OTHER PERSONS OR PROPERTY IN CONNECTION WITH THIS ACTIVITY.

RIDER'S SIGNATURE: _____ OWNER'S SIGNATURE _____

PARENT'S SIGNATURE: _____ DATE: _____

IF RIDER IS UNDER THE AGE OF 18)

FOR OFFICE USE

COGGINS – YES NO

PAYMENT - \$ _____

REV: 6/25

