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

## **2023 SUDDENLY FARM DRESSAGE SCHOOLING SHOW ENTRY FORM**

• ONE HORSE/RIDER COMBINATION PER ENTRY FORM

	SHOW L	DAIE:					
PLEASE PRINT CLEARLY							
RIDER:			BIRTHDATE:				
ADDRESS:				ZIF	)		
EMAIL:	PHONE:	PHONE:		CELL:			
<u>DIVISION</u> : STARTER RIDER	STARTER HORS	E OPEN	JR/YR (21 AND	UNDER)	CIRCLE ANY THAT APPL		
NAME OF HORSE:							
NAME OF HORSE: AGE		R•	HFIGHT:		GENDER:		
OWNER'S NAME:		PHO	1121G111	(CFI	1)		
ADDRESS:							
TRAINER'S NAME:							
TRAINER'S NAME:	******	*****	*****	*****			
CLASS NAME AND DIVISION:	FEES		SPECIAL REQUESTS				
				WILL BE HONORED IN ORDER OF DATE RECEIVED - IF POSSIB			
			-				
			-				
			-				
TOTAL FEES:	(\$30 PER CLAS	S)					
OFFICE FEE:		•					
LATE FEE:		EIVED AFTER	CLOSING DATE				
	、,						
TOTAL ENCLOSED: \$							
*******			******	*****	******		
HOLD HARMLESS CLAUSE: UNDE	RSTANDING THAT HOR	SE SPORTS MAY	BE HAZARDOUS ANI	D DANGERO	US, EVEN LEADING TO		
PERMANENT INJURY OR DEATH,							
RISKS OR LOSS/INJURY, AND AGR		-					
THE SCELBA FAMILY, THE STATE C AND VOLUNTEERS.	OF N.J., THE SHOW MAN	NAGEMENT, THE	SHOW COMMITTEE	AND ALL HO	ORSE SHOW PERSONNEL		
AND VOLUNTEERS.							
I HEREBY ENCLOSE MY ENTRY WE	IICH IS MADE AT MY O	WN RISK AND SI	JBJECT TO THE COND	DITIONS ANI	REGULATIONS OF USDE		
ECDCTA, ECRDA AND SUDDENLY							
NOT RESPOSSIBLE FOR ANY ACCI		•		,			
EMPLOYEES, ATTENDANTS, SPECT	rators, volunteers,	OR ANY OTHER	PERSONS OR PROPE	RTY IN CONI	NECTION WITH THIS		
ACTIVITY.							
RIDER'S SIGNATURE:		OWNE	R'S SIGNATURE				
PARENT'S SIGNATURE:				DATE:			
	IF RIDER IS UNDER TH	E AGE OF 18)		· · · <b>- ·</b> _			
		-					
FOR OFFICE USE							
COGGINS - VES NO	DAVMENT_ ¢	#		DVCKE	т		