**ENTRIES MUST BE COMPLETE WITH SIGNATURE, COGGINS AND PAYMENT

SUDDENLY FARM SCHOOLING DRESSAGE SHOW ENTRY

**ONE HORSE/RIDER COMBINATION PER ENTRY FORM

suddenlyfarmdressage@gmail.com

<u>S</u> +	HOW DATE:			
(PLEASE PRINT CLEARLY)				
Rider:		DATE OF BIRT	RTH:	
Address:	City:	State/Zip:		
Email:	Phone: (H)		(C)	
Rider's USDF #	Member of ESDC	TA: YES NO	ECRDA: YES NO	
Division: Open Starter Rider	Starter Horse	Jr/Yr (under 21	(Circle any that	apply)
Name of Horse:				
Breed: Age: Color:_ Owner's Name:	Height:	Gender:		
Owner's Name:	Phon	e: (H)	(C)	
Address:				
Trainer's Name:				
************* Class Name and Division Class Fees: \$ (\$30 per class Office Fee: \$ 10.00 Late Fee: \$15 - (If RECEIVED AFTER the	\$30 \$30 \$30 \$30 \$30 \$30	<u>SPE</u>	CIAL REQUESTS (if p	ossible will be
Total Enclosed: \$(cash, check or VEN	MO (marilyn-scelb	a) - must accompar	ny entry
Hold Harmless Clause: Understanding that or death; each owner, rider, spectator and other regardless of negligent acts or omissions, Suddershow Committee and all horse show personnels in HEREBY ENCLOSE MY ENTRY WHICH IS MADE ASSOCIA, ECRDA AND SUDDENLY FARM. I UNDER OWNERS ARE NOT RESPONSIBLE FOA ANY ACCIONNERS, RIDERS, EMPLOYEES, ATTENDANTS, SCONNECTION WITH THIS ACTIVITY.	er participant assumes enly Farm, the Scelba Fa AT MY OWN RISK AND RSTAND THAT THE OR DENTS, DAMAGE, LOSS PECTATORS, VOLUNTE	any and all risk of lose amily, the State of Ne SUBJECT TO THE CON GANIZING COMMITTE S, INJURY, OR ILLNESS ERS, OR ANY OTHER F	s / injury, and agrees to w Jersey, the Show Man IDITIONS AND REGULATI EE, THE HOST AND THE P TO THE HORSES, EQUIP PERSONS OR PROPERTY,	hold harmless nagement, the NONS OF USDF ROPERTY MENT, IN
Rider's Signature:		i s signature:		
Parent's Signature (if under the age of 18	3:		Date:	