Hudson Valley Dressage Shows

Hosted By



WILLSWAY EQUESTRIAN CENTER

ENTRY FORM

Show Name: "Where There's A WILL...There's A Way" Summer Sizzle Schooling Show Date: Saturday, August 3, 2024

| Rider's Name: | | _ |
|---------------------------------|------------------------------|---|
| Address: | | _ |
| Email: | Phone #: | |
| (required) Junior Rider DOB: | (required) Senior Rider DOB: | |
| Julioi Ridel DOB. | | |
| Horse's Name: | DOB: Breed: | |
| Horse Owner's Name: | | |
| Horse Owner's Address: | | |
| Horse Owner's Email: | / Phone #: | |
| Barn Name: | Trailer Size: | |

Judge: Allison King
Cost Per Class: \$35.00 / Cost Per Championship Class \$55.00

| Class # (Limit: Two Tests Per Rider) | Class Name | Total |
|--------------------------------------|------------|----------|
| | | \$ |
| | | \$ |
| | Office Fee | \$ 20.00 |
| | TOTAL | \$ |

Entries Must Be Accompanied By a Negative Coggins / Proof of Vaccinations and Payment.

Entrer Via: horseshowoffice.com (show name: WillsWay Equestrian Center Summer Sizzle) **or** Email: willswayequestrian@gmail.com

(payment must be received within five (5) days of entering the show)

WillsWay Equestrian Center / P.O. Box 120 / Washingtonville, NY 10992 10992 or Venmo Payments Accepted: @WillsWayEqCtr (please add \$7.00 to your entry fee)

Entries must be received by July 30, 2024



WILLSWAY EQUESTRIAN CENTER

RELEASE FORM

(One Form Per Participating Rider)

I acknowledge the inherent risks associated with horseback riding and I am participating at my own risk. I hereby assume this risk and further do release and hold harmless and indemnify WillsWay Equestrian Center and its owners, organizers, judges, and officials, their officers, agents, employees and volunteers, the host of this event or horse show and the owners of any property on which the event or show is being held, from all liability for negligence or any responsibility for accidents, damage, injury or illness to myself, owners, lessee, trainers, handlers, riders, grooms, employees, attendants, spectators, or any other person or property whatsoever including the horse or horses which I will compete at this event or show.

By entering and signing all forms I agree to the above statement.

If I am a parent or guardian of a junior exhibitor, I consent to the minor's participation and agree to the above statement.

| Rider's Signature | Date | |
|-----------------------------|------|--|
| Parent / Guardian Signature | Date | |
| (if exhibitor is a minor) | | |
| Owner's Signature | Date | |