

Champlain Dressage Schooling Series 2024
www.ChamplainDressageVt.com
Official Entry Form

Name of Show and Date: _____

Rider: _____ Age: Sr. or Jr. (under 18) Phone: _____

Address: _____

E-mail Address _____ (ride times may be emailed/or check website)

Name of horse _____ Color _____ Sex _____

Horse's Age _____ Height _____ Trainer/Stable Affiliation _____

Horses's Owner _____ Phone _____

Class #		Class Title -Dressage Test Name	Dressage Test Fee: \$45.00 each test	Amount
2-phase (one jumping round one dressage test)		Division : <u>Height and Dressage test</u> (See Class List for choice of division heights and dressage tests available) <u>Indicate division and Dressage Test</u> (Chose one of the two tests offered)	2 phase Fee: \$55.00	Amount
2-phase	Height:	Test to ride: <u>Include dressage Test of Choice</u>		
Freestyle- One horse			Freestyle- One horse \$50.00	
Freestyle- Multiple horses			Freestyle-Multiple horses \$50.00	

Required: Include a negative Coggins (current within 12 months) and Rabies Certificate, and signature below

Your entry will be processed as a post entry if your envelope is post marked after closing date and/or copies of current Coggins test, rabies certificate and payment in full are not included, post entry fee is \$20.00.

Class Total \$ _____

Other fee \$ _____

There are no refunds after the closing date!

Total \$ _____

I hereby enter my horse at my own risk. I further agree that if any injury occurs to me, my horse, or any equipment that I may use, I will make no claim therefore against the farm, the employees, the organizers, the volunteers, and/or the owners of the farm where this event is taking place. I further agree to hold the farm, the employees, the organizers, the volunteers, and/or the owners of the farm where this event is taking place free and harmless from any liability, claims, suits or damages of whatever kind that may be occasioned by the horse/s exhibited by me or the negligence of the person/s in charge of such horse/s and I agree to indemnify and hold harmless these people above mentioned against all liability, claims, suites and expense including any attorney fees incurred arising out of any injury to any person/s or damage to any property caused by me, my horse/s or attendant/s. In addition I agree that while riding, I and any other riders of my horse/s, will wear protective headgear.

Signature of Rider: _____ Signature of Owner: _____

Signature of parent if rider is under the age of 18: _____