

West Newbury Riding and Driving Club

Pipestave Stadium Practice Entry Form – June 13, 2010

ONE FORM PER RIDER ~ MAKE COPIES AS NEEDED

Pre-entry postmark deadline is Thursday June 10, 2010!

PLEASE PRINT!

RIDER NAME	_____	IS AGE < 18?	YES / NO		
PARENT/GUARDIAN NAME	_____		IF AGE < 18		
STREET ADDRESS	_____				
CITY, ST, ZIP	_____				
TELEPHONE/CELL	_____	EMAIL	_____		
Emergency Contact Name	_____				
PHONE/CELL	_____	EMAIL	_____		
HORSE 1 NAME	_____	Proof of Negative Coggins Required			
HORSE 2 NAME	_____	Enclose photocopy of negative Coggins test			
HEIGHTS you plan to Jump (CIRCLE ANY that apply)		dated within past 12 months for each horse.			
X/18"	2'	2'3"	2'6"	2'9"	3'

(For management planning only, you can change your mind on the day)

Trainer/Stable affiliation, if applicable: _____

EACH RIDER OR PARENT/GUARDIAN MUST SIGN WAIVER AS CONDITION OF PARTICIPATION

I enclose the total shown below for the aforementioned entry, which is made at my own risk and subject to the conditions of the sponsoring Club. Further, in doing so, I understand that this competition can be dangerous for both horse and rider. In addition, I release the West Newbury Riding and Driving Club, its members, all volunteers, the Town of West Newbury, Landowners and organizers from any and all liability actions, causes of action, claims and demands of every kind and nature whatsoever which may arise in connection with or resulting from participation in any activities.

Signature: _____

Parent or Guardian must sign if rider is under 18 years of age.

PRINT NAME _____

DATE: _____

ENTRY FEE: \$30 PER HORSE/RIDER COMBINATION

Checks payable to: **WNRDC**

TOTAL ENCLOSED: \$

\$

MAIL ENTRIES TO: PIPESTAVE STADIUM PRACTICE
C/O Kathryn West McLeod
552 Main Street
West Newbury, MA 01985

Check must accompany entry form.
MAILED entries ONLY accepted.
No fax, phone, or email entries.
\$25 fee charged for bad/returned checks