

Cayuga Dressage and Combined Training, Inc. Entry Form

Bridle Number (Office use)

To be used for CDCT, Inc clinics and schooling shows. Entry form to be sent to the Secretary listed for the given Activity

Activity:			Date:			
Location:						
RIDER INFORM	IATION					
Name			_			
Street						
City			_			
HORSE INFORM						
Breed		_Color	Sex Height	Age _		
Class #	Show Class, Div	vision and Le	vel or Lessons - Priva	ite or Semi-P	rivate F	ee
<u> </u>		STABLING F	ees: Dates	to		
CDCT Member		#	ees: Dates Day Stalls	<u> </u>	=	
Adult Amate	ur	#	Overnight Stalls	@	=	
Open		#	Tack Stalls	@	=	
Junior – Birthday		Special Requ Stabling Gro	ıests: up			
		J		Entry Fees	=	
				Late Fees	=	
				Office Fees	=	
			Other Fees		=	
		тот	AL (checks payable to C	CDCT, Inc.) :	\$	
RELEASE: I understa myself and my hors Inc., the host, the cl	and that horse sports e. I agree to hold hard linician, and property	are high-risk activ mless the Organiz owners from any	* * * * * * * * * * * * * * * * * * *	g solely at my ow s, Cayuga Dressa se including negl	n risk. I assur ge and Combi igence resulti	ne this risk for ined Training, ng in
Rider Signature:			Date:			
Parent Signature, if	rider is under 18 year	rs of age:	Date:			

ENTRIES will be accepted only if complete with signatures, payment of fees, and current Coggins & Rabies Certificates.