|  |  |  |
| --- | --- | --- |
|  | **FADS at \_\_\_\_\_FarmName\_\_\_\_\_**  \_\_\_\_\_\_\_FarmAddress\_\_\_\_\_\_  **PRIZE LIST**  *www.\_\_\_FarmWebSite\_\_\_\_\_*  *www.FrederickDressage.org* | Farm  Logo |

|  |  |  |  |
| --- | --- | --- | --- |
| **SHOW DATE** | **OPENING DATE** | **CLOSING DATE** | **JUDGE** |
| Date | date 3 wks  before show | date 1 wk  before show | Judge Name (L) |
| Date | date 3 wks  before show | date 1 wk  before show | Judge Name (L) |

**Ride Fee:** $25 per ride.

**Tests**: All current USDF, USEF, and FEI dressage tests and all eventing dressage tests.

**Show Ribbons:** First through sixth places. High Score and Reserve High Score for each show.

**Submitting Entries:**

Enter online at [www.FrederickDressage.org](http://www.FrederickDressage.org) or mail this sicompleted form and signed release, copy of current Coggins, and check or cash to \_\_\_\_Name\_\_\_\_\_, \_\_\_\_Address\_\_\_\_\_, \_\_\_City\_\_\_\_\_, ST ZipCode. Checks made out to **\_\_\_\_\_Name\_\_\_\_\_\_.** Questions? Email \_\_\_\_Name\_\_\_\_ at \_\_\_\_EmailAddress\_\_\_\_\_\_.

**Ride Times:** TUESDAY before the show ride times will be posted at [www.FrederickDressage.org](http://www.FrederickDressage.org) and emailed.

**Year End Awards:** Awarded by level to rider/horse combinations that ride in at least two of the FADS shows.

|  |  |
| --- | --- |
| **RIDER NAME** |  |
| **RIDER STATUS** | **Circle One:** Professional Adult Amateur Junior/Young Rider |
| **RIDER PHONE** |  |
| **RIDER EMAIL** |  |
| **HORSE NAME** |  |
| **TEST 1** |  |
| **TEST 2** |  |
| **TEST 3** |  |
| **TOTAL $$ DUE** |  |

By entering this show, I agree to assume the risk of all the dangers inherent in horse activities, all the dangers inherent in being present on a farm, and all the dangers inherent in interacting with other horse people. I agree to hold harmless \_\_\_\_\_FarmName\_\_\_\_\_\_\_ and its agents and show volunteers.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date