

FADS at Ship's Quarters Farm Entry Form

SHOW DATE:	
Rider Name:	
Rider Address:	
City, ST, ZIP:	
Rider Phone:	
Rider E-mail:	
Rider Status:	<input type="checkbox"/> Adult Amateur <input type="checkbox"/> Junior/Young Rider <input type="checkbox"/> Professional
Horse Name:	

Class #	Dressage Test/Preference if Oversubscribed	Entry Fee (\$25/ride)
	TOTAL ENTRY FEES	

Release: I (we) understand that horseback riding is a dangerous sport and serious injury or disability may result from accident while riding or handling horses. The above activities are being undertaken at my (our) risk. I(we) understand that Ship's Quarters Farm, its owners, employees, and volunteers are not responsible for accidents, damage, injury to horses, owners, riders, spectators or any persons or property whatsoever. ASTM/SEI approved helmets are required for all riders at all times while mounted.

Participant Signature: Print Name: _____ Date: _____

Parent/Guardian Signature: Print Name: (If rider is under 18 years of age) _____ Date: _____

Emergency Contact (Name/Phone): _____

Mail entry, current coggins and check payable to **Ship's Quarters Farm** to:

Evelyn Pfoutz
 1104 Lucabaugh Mill Rd, Westminster, MD 21157

Scratches before the closing date will be issued a full refund.

No refunds after the closing date for ANY reason. Show will be held rain or shine.
 \$35 fee assessed for returned checks. Entries must be received by closing date.