

2021 WRC Dressage Schooling Show Series

Date of Show **May 1st**

May 22nd

June 5th

Back Number _____

Entries must be postmarked a minimum of 10 days before the show including full payment. A current negative Coggins test and proof of rabies vaccination is required at registration.

Name of Rider

Rider Age 12/1/20 USEF

Name of Horse

Member

Phone

Last Name	First Name	DOB Required		Yes / No	

Address

City/Town

State/Zip

email

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High Point Divisions Select Classes

Select High Point Division Youth or Adult

- Intro Youth (1, 2, 3, 4, 5)
- Intro Adult (1, 2, 3, 4, 5)
- Western Intro Youth (6, 7, 8, 9, 10, 11)
- Western Intro Adult (6, 7, 8, 9, 10, 11)
- Training Level Youth (12, 13, 14, 15, 16)
- Training Level Adult (12, 13, 14, 15, 16)
- First Level (12, 13, 17, 18, 19)
- Second Level (20, 21, 22, 23, 24)
- Third Level (20, 21, 25, 26, 27)
- Western Basic Youth (28, 29, 30, 31, 32, 33)
- Western Basic Adult (28, 29, 30, 31, 32, 33)
- Western First Level Youth (34, 35, 36, 37, 38, 39)
- Western First Level Adult (34, 35, 36, 37, 38, 39)

Note: Two eligible tests must be ridden in the division to qualify for day end division high point awards. To qualify for Series end and Member Year end Awards two show must be attended.

Age Divisions: Youth: Jr age 13 and under Sr age 14 -18
 Adult: age over 18

Tests Entered _____ X \$25 = _____
 Other Classes Entered _____ X \$ 8 = _____
Grounds Fee (WRC Members Exempt - Proof of Membership Required) **\$5**
Office Fee (Per Horse / Rider Combination- same # for the entire season) **\$10**
 WRC is practicing Social distancing. For our safety and yours!
Total = _____

Please make all checks payable to Williamsport Riding Club
***** All Returned Checks will be charged a \$30 fee per Return *****
 Note Trainers and Farms may not pay for student's registration with one check.
 Family members may pay with one check.
WRC Membership fee, \$20 Individual or \$30 Family – separate documentation & check required

Enter the class numbers entered to the right.

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I understand that neither the Williamsport Riding Club, its officers, board of directors, judges, or organizing committee accept any responsibility for accidents, damage, injury or illness to the horses, owners, riders, trainers, spectators or any other person or property in connection with this competition. I hereby expressly agree for myself and my principals, representatives, employees and agents: (1) to be bound by the local rules of this competition; (2) that every horse and rider is eligible as entered; and (3) and to accept as final any decision the competition officials on any question arising under the competition rules, and agree to hold the WRC, its officers, board of directors, show committee, and competition judges, harmless for any action taken. I am fully aware that horse sports, and this competition involve inherent dangerous risk of serious injury or death and by participating I do so voluntarily and expressly assume any and all risks of injury or loss, and I agree to release the WRC, its officers, directors, show committee and competition judges, from and against all claims including any injury or loss suffered during or in conjunction with the Competition. I agree to indemnify and hold harmless the WRC its officers, directors, competition judges, from any and all claims for loss or injury caused by me or my horse that occur during or in conjunction with this competition.

Name _____ Signature _____ Date _____

Print name

Signature of Parent/Guardian if Minor is registering

Mail Entries To also notify by email amy.rankinen@gmail.com

Williamsport Riding Club
Attn: Dressage Schooling Show Series
2012 Poco Farm Road
Williamsport, PA 17701

Mail 10 days prior
to show for timely
postal delivery

Office Use Only

Paid CASH _____ **CHECK** _____ # _____ **Initials**

___/___/___ Date of Rabies Vacc

___/___/___ Date of Neg. Coggins