

Note: Fillable form - must be downloaded and file saved first. Then the form can be filled out and submitted.

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	

High Point Divisions Select Classes **Select High Point Division Youth or Adult**

- | | |
|--|---|
| <input type="checkbox"/> Intro Youth (1, 2, 3, 4, 5)
<input type="checkbox"/> Intro Adult (1, 2, 3, 4, 5)
<input type="checkbox"/> Western Intro Youth (6, 7, 8, 9, 10, 11)
<input type="checkbox"/> Western Intro Adult (6, 7, 8, 9, 10, 11)
<input type="checkbox"/> Training Level Youth (12, 13, 14, 15, 16)
<input type="checkbox"/> Training Level Adult (12, 13, 14, 15, 16)
<input type="checkbox"/> First Level (12, 13, 17, 18, 19)
<input type="checkbox"/> Second Level (20, 21, 22, 23, 24)
<input type="checkbox"/> Third Level (20, 21, 25, 26, 27)
<input type="checkbox"/> Western Basic Youth (28, 29, 30, 31, 32, 33)
<input type="checkbox"/> Western Basic Adult (28, 29, 30, 31, 32, 33)
<input type="checkbox"/> Western First Level Youth (34, 35, 36, 37, 38, 39)
<input type="checkbox"/> Western First Level Adult (34, 35, 36, 37, 38, 39) | <p>Therapeutic (Test of Choice)</p> <p>Grade _____</p> <p>Test 1 _____</p> <p>Test 2 _____</p> |
|--|---|

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: 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.

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 _____

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	<div style="border: 1px solid black; padding: 5px;"> Mail 10 days prior to show for timely postal delivery </div>	<b style="text-align: center;">Office Use Only <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Paid</td> <td>CASH _____</td> <td>CHECK _____</td> <td># _____</td> <td>Initials _____</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">_/_/_/____ Date of Rabies Vacc</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">_/_/_/____ Date of Neg. Coggins</td> </tr> </table>	Paid	CASH _____	CHECK _____	# _____	Initials _____		_/_/_/____ Date of Rabies Vacc					_/_/_/____ Date of Neg. Coggins			
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