

# 2023 WRC Fall Dressage Schooling Shows

Date of Show **September 30**

**October 14**

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		Date of Birth	Rider Age 12/1/22	Name of Horse		Member	Phone	
First Name	Last Name					Yes No		
Address		City/Town		State	Zip	email		Pony or Horse Height
Select Division				Select Division				

- Intro Youth (1, 2, 3)
- Intro Adult (1, 2, 3)
- Western Intro Youth (4,5,6,7)
- Western Intro Adult (4,5,6,7)
- Training Level Youth (8,9,10)
- Training Level Adult (8,9,10)
- First Level (11,12,13)
- Second Level (14,15,16)
- Choice of Test (17, 18)
- Western Basic Youth (19, 20, 21, 22)
- Western Basic Adult (19, 20, 21, 22)
- Western First Level (23, 24, 25, 26)
- Therapeutic Min. Assist (27, 28 Test of Choice - Test 1, Test 2)
- Therapeutic No Attendant (31, 32, Test of Choice - Test 1, Test 2)
- Leadline (Traditional 31, 32, Western 33, 34)

**Age Divisions:**

Youth:  Jr age 13 and under

Sr age 14 -18

Adult:  ages 19+

**Tests Entered**

\_\_\_\_\_ X \$25 = \_\_\_\_\_

**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 \_\_\_\_\_

Print name

Signature of Parent/Guardian if Minor is registering

Mail Entries To also notify by email [williamsportrc@gmail.com](mailto:williamsportrc@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