

LORD CREEK FARM HORSE TRIALS

Entry Form – Horse Trials

Sunday, August 27, 2006

OFFICIAL USE ONLY

SEND ENTRY TO:

Debbie Welles, Secretary
146-3 Boston Post Rd.
Old Lyme, CT 06371
Dwrs03@aol.com

Entry Fees		
Coggins /Rabies		
Signature		

INCOMPLETE ENTRIES WILL BE RETURNED

Rider _____ Date of Birth _____

Street _____ City _____ State _____ Zip _____

Telephone _____ Email _____

Owner _____ Telephone _____

Trailer Size _____ Is this your first event? Yes ___ No ___

Division: Novice _____ Beg. Novice _____ Elementary _____

Age Level: Jr (18 & under) _____ Sr. _____

Horse Name: _____

Color: _____ Sex: _____ Height: _____ Age: _____

Rider Experience _____ Horse Experience _____

I enclose herewith \$ _____ for the aforementioned entry, which is made at my own risk and subject to the conditions of sponsoring Horse Trials and, where applicable, the regulations of the USEA. I understand that neither the Organizing Committee, nor the employees and owners of Lord Creek Farm, Lyme Equestrian Association, Connecticut Valley Pony Club or High Hopes Therapeutic Riding Inc. or anyone acting on their behalf accepts responsibility for accidents, damage, injury or illness to the horses, owners, riders, employees, attendants, spectators or any other person or property owners in connection with this event.

Rider Signature _____ Date _____

Parent Signature _____ Date _____

(NOTE: A Parent or Guardian must sign entry if competitor is under 18 years of age.)

Trainer Signature _____ Date _____

Owner Signature _____ Date _____

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