

New York/Upper Connecticut Regional Dressage Rally
Monday, June 30, 2003
Kent School, Kent, Connecticut

Individual Rally Release Form

(to be completed for each Pony Clubber)

Pony Club: _____ Region _____
Name: _____ Gender: _____ Age: _____ Rating: _____
Address: _____

Phone #: _____

Email: _____

Special Needs _____

Horse/Pony Name: _____ Gender: _____ Age: _____

TEST 1 ***TEST 2*** ***KUR- yes or no*** ***Other***

I agree that the organizing committee of this rally, its officials, New York/Upper Connecticut Region, Sleeping Giant Pony Club, Mad River Pony Club, Kent School Stables their employees, and USPC, INC will not be held liable for any loss, accident, injury, illness to horses, riders, owners, attendants, spectators, or any other person, corporation, or property whatsoever. I hereby give permission for my child to participate under this agreement.

ALSO My child and I have read and understand the policies and regulations governing the United States Pony Club, Inc., and specifically the USPC Rules and Definitions for Dressage Rallies, 2003 including any applicable addenda. We agree to abide by these rules at the New York/Upper Connecticut Regional Qualifying Rally June 30, 2003.

***** I **AM** / **AM NOT** (circle one) interested in qualifying for Dressage Nationals in 2003.

Parent Signature _____ Date _____

Pony Clubber Signature _____ Date _____

This Pony Clubber is in good standing with the USPC, Inc., and _____ Pony Club, with all dues and insurance paid as of this date. The horse entered in the regular mount of the rider, regularly ridden at local rallies, and to my knowledge, qualified to ride at the level entered.

District Commissioner _____ Date _____

Or Joint District Commissioner _____ Date _____

I declare my horse to be in good heather and condition. However, I give my permission, in case of emergency, for immediate treatment by a licensed veterinarian.

Date: _____ Owner Signature: _____

Phone #: _____