

## 2016 WRC Dressage Schooling Show Series

**Date of Show**      **April 23rd**      **May 28th**      **July 9th**

**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 1/1/16	Name of Horse	Member	Phone
Last Name	First Name	Required	Yes    No	
Address	City/Town	State/Zip	eMail	

Select Classes	Select High Point Division																								
<ol style="list-style-type: none"> <li>1. Suitability to be a Dressage Horse W/T *</li> <li>2. Dressage Equitation W/T*</li> <li>3. USDF Intro Test A Jr/Sr</li> <li>4. USDF Intro Test B Jr/Sr</li> <li>5. USDF Intro Test C Jr/Sr</li> <li>6. Suitability to be a Dressage Horse W/T/C*</li> <li>7. Dressage Equitation W/T/C*</li> <li>8. Training Level Test 1 Jr/Sr</li> <li>9. Training Level Test 2 Jr/Sr</li> <li>10. Training Level Test 3 Jr/Sr</li> <li>11. First Level Test 1      *Suitability and equitation classes held in warm up ring</li> <li>12. First Level Test 2</li> <li>13. First Level Test 3</li> <li>14. Second Level (Select Test of Choice Below)  <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <span>Second Level Test 1</span> <span>Second Level Test 2</span> <span>Second Level Test 3</span> </div> </li> </ol>	<p style="font-size: small; text-align: center;"><i>Note: Two eligible tests must be ridden to qualify for division high point awards.</i></p> <table style="width: 100%;"> <tr> <td style="width: 50%;">Intro Junior (1, 2, 3, 4 &amp; 5)</td> <td style="width: 50%;">Western Intro Junior (15, 16, 17 &amp; 18)</td> </tr> <tr> <td>Intro Senior (1, 2, 3, 4 &amp; 5)</td> <td>Western Intro Senior (15, 16, 17 &amp; 18)</td> </tr> <tr> <td>Training Level Jr (6, 7, 8, 9 &amp; 10)</td> <td>Western Basic Junior (19, 20, 21, 22)</td> </tr> <tr> <td>Training Level Sr (6, 7, 8, 9 &amp; 10)</td> <td>Western Basic Senior (19, 20, 21, 22)</td> </tr> <tr> <td>First Level and above Jr (6, 7, 11, 12, 13 &amp; 14)</td> <td>Western First Level and Above (19, 20, 23, 24)</td> </tr> <tr> <td>First Level and Above Sr (6, 7, 11, 12, 13 &amp; 14)</td> <td></td> </tr> </table> <p style="text-align: center;"><b>AGE DIVISIONS:    Junior (age 14 and under)    Senior (age 15 and over)</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><b>Tests Entered</b> _____</td> <td style="text-align: right;"><b>x \$25 =</b> _____</td> </tr> <tr> <td><b>Other Classes Entered</b> _____</td> <td style="text-align: right;"><b>x \$ 5 =</b> _____</td> </tr> <tr> <td><b>Number Fee</b> per horse/rider combination - same # for the entire season (not refundable)</td> <td style="text-align: right;"><b>\$2</b></td> </tr> <tr> <td><b>Grounds Fee</b> (WRC Members Exempt - Proof of Membership Required)</td> <td style="text-align: right;"><b>\$5</b></td> </tr> <tr> <td><b>Office Fee</b> (Per Horse / Rider Combination)</td> <td style="text-align: right;"><b>\$5</b></td> </tr> <tr> <td></td> <td style="text-align: right;"><b>Total =</b> _____</td> </tr> </table> <p style="text-align: center;"><b>Please make all checks payable to Williamsport Riding Club</b></p> <p style="text-align: center; font-size: small;">*** All Returned Checks will be charged a \$30 fee per Return ***</p>	Intro Junior (1, 2, 3, 4 & 5)	Western Intro Junior (15, 16, 17 & 18)	Intro Senior (1, 2, 3, 4 & 5)	Western Intro Senior (15, 16, 17 & 18)	Training Level Jr (6, 7, 8, 9 & 10)	Western Basic Junior (19, 20, 21, 22)	Training Level Sr (6, 7, 8, 9 & 10)	Western Basic Senior (19, 20, 21, 22)	First Level and above Jr (6, 7, 11, 12, 13 & 14)	Western First Level and Above (19, 20, 23, 24)	First Level and Above Sr (6, 7, 11, 12, 13 & 14)		<b>Tests Entered</b> _____	<b>x \$25 =</b> _____	<b>Other Classes Entered</b> _____	<b>x \$ 5 =</b> _____	<b>Number Fee</b> per horse/rider combination - same # for the entire season (not refundable)	<b>\$2</b>	<b>Grounds Fee</b> (WRC Members Exempt - Proof of Membership Required)	<b>\$5</b>	<b>Office Fee</b> (Per Horse / Rider Combination)	<b>\$5</b>		<b>Total =</b> _____
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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, 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

Class Numbers Entered																				
For Office Use	Place																			
	Points																			

<p>Mail Entries To (Postmarked by 4/13, 5/18, and 6/30):</p> <p><b>Williamsport Riding Club</b>  <b>Attn: Dressage Schooling Show Series</b>  <b>2012 Poco Farm Road</b>  <b>Williamsport, PA 17701</b></p>	<p><b>Office Use Only</b></p> <p><b>Paid CASH</b> _____ <b>CHECK</b> _____ <b>#</b> _____ <b>Intitials</b> _____</p> <p>____/____/____ Date of Rabies Vacc</p> <p>____/____/____ Date of Neg. Coggins</p>
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