

# 2016 Williamsport Riding Club Children's Show Series Entry Form

Back Number \_\_\_\_\_

Date of Show		May 14th	July 30th	August 27th	Pre-Entries Postmarked by 5/5, 7/27 & 8/18				
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				

Indicate division(s) for points. In each category, choose one Pleasure, one Gymkhana, and any Open divisions that apply.

<input type="checkbox"/> Western Lead Line (10 & under) (1 or 2) 49, 8, 9, 10, 90, 96 <input type="checkbox"/> Western 10 & Under (W/J) (1 or 2) 5, 15, 16, 17, 91, 96 <input type="checkbox"/> Western Novice (W/J) (11 - 18) (1 or 2) (6 or 7) 18, 19, 20, 91, 96 <input type="checkbox"/> Western Jr. Youth (14 and Under) (1 or 2) (5 or 6) 25, 26, 27, 93, 96 <input type="checkbox"/> Western Sr. Youth (15-18) (1 or 2) 7, 28, 29, 30, 94, 96 <input checked="" type="checkbox"/> Gymkhana (Trot/Jog) 32, 35, 38, 41, 44 <input checked="" type="checkbox"/> Gymkhana (Canter) 33, 36, 39, 42, 45 <input checked="" type="checkbox"/> Walk-Halt (1 or 2, 46 or 47) (51 or 52) 11, 12, 13, 90, 96 <input checked="" type="checkbox"/> Therapeutic (1 or 2, 46 or 47) 48, 56, 57, 58, 90	<input type="checkbox"/> English Lead Line (W/T) (10 & under) (46 or 47) 49, 53, 54, 55, 90, 96 <input type="checkbox"/> English 10 & Under (W/T) (46 or 47) 50, 72, 73, 74, 91, 96 <input type="checkbox"/> English Novice (11 -18) (W/T) (46 or 47) (51 or 52) 75, 76, 77, 91, 96 <input type="checkbox"/> English Jr. Youth (14 & Under) (46 or 47) (50 or 51) 78, 79, 80, 93, 96 <input type="checkbox"/> English Sr. Youth (15-18) (46 or 47) 52, 81, 82, 83, 94, 96 <input type="checkbox"/> Cross Rails (W/T 60 and 61) or (62 and 63) <input type="checkbox"/> Hunter 64, 65, 66, 67, 84, 85, 86 <input type="checkbox"/> Driving 87, 88, 89 <input type="checkbox"/> Miniature Horse 3, 4, 92, 95 <input type="checkbox"/> Ranch Horse / Pony (1 or 2) 22 (91 or 93 or 94) 96
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Class Numbers Entered																			
For Office Use	Place																		
	Points																		

<b>Pre-Registered Classes Entered</b> _____ x _____ = \$ _____ <b>Post-Registration Classes Entered</b> _____ x _____ = \$ _____ <b>Number Fee</b> per horse/rider combination - same # for the entire season not refundable      \$2 _____ <b>Grounds Fee</b> (WRC Members Exempt - Proof of Membership Required)      \$5 _____ <b>Office Fee</b> (Per Horse/Rider Combination)      \$5 _____ Please make all checks payable to Williamsport Riding Club <b>Total</b> _____ <p style="text-align: center;">** All Returned Checks will be charged a \$30 fee per Return **</p>	<p style="text-align: center;"><i>Mail Pre-Entries to:</i></p> <b>Williamsport Riding Club Attn: Children's Show Series</b> <b>2012 POCO Farm Road, Williamsport, PA 17701</b> Office Use Only _____ Initials Paid    CASH _____    CHECK _____    # _____ ___/___/___ Date of Rabies Vacc ___/___/___ Date of Neg. Coggins
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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, 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	