



HIGH COUNTRY WORKING EQUITATION

Schooling show July 27th 2024

Hosted by:

9490 N US HWY 85 Highlands Ranch, CO 80129



Judge/Clinician: <u>Ginny Gilles</u>	Show Manager: <u>Jameson Cahill</u>
Technical Delegate: <u>N/A</u>	Show Scribe: <u>IBD</u>

PLEASE TYPE OR CLEARLY PRINT. ONLY ONE HORSE PER ENTRY FORM. ENTRIES DUE BY 7/20/24 9PM

All entries must be complete and contain the correct fees and payments.

Rider Name		HCWE Member	<input type="checkbox"/> YES <input type="checkbox"/> NO
Rider DOB if under 18		Horse Breed	
Phone		Horse DOB	
Address		Sex (M,G,S)	
Email		Color	
Emergency Contact	Name: Phone:	Owner Name Owner Cell #	
USAWA member # (if applicable)		Horse Name USAWA Horse # (if applicable)	

Participant Level 3-Phase Show:

- | | |
|------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Youth/ Leadline | <input type="checkbox"/> Leadline - 7yrs or younger |
| <input type="checkbox"/> Adult Amateur | <input type="checkbox"/> Intro: Dressage & EOH |
| <input type="checkbox"/> Open Class | <input type="checkbox"/> Novice A: Dressage, EOH, Speed |
| | <input type="checkbox"/> Novice B: Dressage, EOH, Speed |
| | <input type="checkbox"/> Intermediate A: Dressage, EOH, Speed |
| | <input type="checkbox"/> Intermediate B: Dressage, EOH, Speed |

Show Fees: Leadline: \$25 Youth: \$50 Adult Member L1: \$75
 Adult Member L2+: \$100 Non-Member: \$25 Late Fee: \$25

Total Fees:

Ribbons awarded to Third Place

Send Payment via Zelle or Paypal: hcweinfo@gmail.com (please add an extra \$1 for every \$25 sent via PayPal)

or Checks Payable to HCWE POB 177, Firestone, CO 80520

Email entry form to hcweinfo@gmail.com Show limit of 20

Your spot will be held when payment is received. **Entries received after 7/20/24 will add a \$25 late fee**

Contact Brandi Baldwin at 303.359.3102 with questions or email at rowdyranchboarding@gmail.com



LIABILITY RELEASE

BY TYPING MY NAME BELOW, I DO HEREBY STATE THAT I
HAVE READ AND UNDERSTAND THE FOLLOWING:

It is my choice to participate in the equestrian activities and I choose and understand the risks associated with the activities; I indemnify and hold harmless Central Colorado Eventing, its members and volunteers, Highlands Ranch Metro District, management, staff, volunteers, agents of this activity with regard to injuries or death to myself or my horse; I assume full responsibility for any and all injuries or death that may occur at this activity.

Riders Signature: _____