

EHSC COMBINED TEST - ENTRY FORM

June 27, 2021

Check Division(s) Entered

Intro Novice
 Starter Training
 Beginner Novice

Dressage Only or extra test: _____

List test(s) _____

Extra Jumper Round: List height(s): _____

Rider's Name: _____ Age: _____

Phone: (H) _____ (C) _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Horse's Name: _____

Emergency

Contact _____ Phone # _____

ON or OFF Grounds (please circle one)

Combined Test Fees: _____ \$35 per division

Extra Dressage Test: _____ \$15 per test

Extra Jumper Round: _____ \$10 per round

Stabling: _____ \$15 Member, \$25 Non-member/day

Tack Stall: _____ \$10 (If available)

Shavings: _____ \$10 per bag (can bring your own)

Late Fee: _____ \$10 (entry postmarked after (6/12))

Total Fees: _____

Please Stable with _____

Hold Harmless: I hereby enter the EHSC competition at my own risk and agree to participate under this agreement. It is hereby agreed that the organizing committee, its officials, EHSC and or its employees or owner will not be liable for any loss, accident, injury, illness to horse, rider, owner, attendant, volunteer, spectator, or any other person, whatsoever.

_____/_____/_____ Date: _____

Signature / (AND parent/guardian's signature if under 18 yrs)

Make checks payable to **EHSC** and mail (postmark by 6/12) to:

Brittany Hartley
930 Beach Drive
Fairview PA 16415