Member: Y N **Number: _____**

Coggins: _____ **Paid: $_____**

Rabies: _____ **How: _____**

Southern Dutchess Horseman's Association
Schooling Horse Show
Entry Form

Rider Information:

Rider: _____ Age: ____

Address: _____

_____

Phone: _____

Email: _____

Horse Information:

Horse/Pony Name: _____

Horse/Pony Owner: _____

Breed: _____

Height: _____

Trainer:_____

ENTRY FEE DAY OF SHOW: MEMBER $15.00 NONMEMBER $20.00

CLASS #	DESCRIPTION	PRE-ENTRY FEE Members $10 Non-Members $15
	Membership Dues (if joining today)	
	TOTAL	

I assume complete responsibility for any injury or accident incurred while a participant in any horse-related event. I further assert that Stormville Airport and the Southern Dutchess Horseman's Association shall not be liable for any injury or death incurred resulting from the inherent risk of horseback riding. Neither I, nor my representatives, assignees, or heirs shall make any claim against, maintain any action against, or recover any loss, damage or death the participant resulting from the risk of an equine event.

Signed:_____ Date: _____

Signed: _____
(Parent or Guardian of Minor)

PRE-ENTRIES CAN BE FAXED TO (845) 855-8226 UP TO 2 DAYS PRIOR TO SHOW