Queen City Dressage Circuit

ENTRY FORM

DO YOU WANT TO PARTICIPATE IN QCDC YEAR END AWARDS?. CIRCLE:(YES/NO) **(SR./JR).**

These **MUST** be circled on **EACH** entry form for scores to count!

Date of Show_____ Name of Show_____

Class Number	Class Description	Entry Fee
		$
		$
		$
		$
		$
		$
Stabling Fee:		$
Office Fee ($ 5.00)		$

Late Fee: ($5.00) per class for entries received after the Tuesday prior to show date. All late entries based on availability.

TOTAL ---------- **$**

ONE HORSE/ONE RIDER PER FORM MSEDA#_____

I understand that equestrian sports are inherently dangerous and I am participating at my own risk. I am willing to assume this risk involved to myself, my family, my horse(s), guests, my vehicles and additional property. I hold the organizers of this show, their volunteers, officials, property owners, sanctioned bodies, and anyone else involved in this show harmless for any damage, loss, or injury suffered while on the show grounds. I have read and fully understand this release and consent to these conditions to enter this show. This agreement is made in the state of Ohio and shall be enforced and interpreted under the laws of the State of Ohio.

Musical Ride? Please specify Arena Size: (circle) **Standard or Small** **Specify Level**_____

(*Pas de Deux* & Quadrille Riders- Please submit forms together, but please note: EACH rider must submit entry form & fees)

State your partners in your Musical Rides_____.

Riders'Name_____Horse'sName_____

Address_____

City, State, ZIP_____Telephone_____

E-Mail_____ Team (TDC Only)_____

Signature_____ Print Name_____

(Parent Or Guardian MUST sign if the rider is under 18)

Mail entry to Show Secretary of EACH show

CLOSING DATE IS 7 DAYS PRIOR TO SHOW DATE!!!!

A Copy of Your Horse's Current Negative Coggins is Required with this Form.

Out-of-State Riders Bring Health Certificate for Your Horse's entry.