

Sassy Strides Equestrian
Dressage Show & 2-Phase
Entry Form

May 8th, 2022
Dressage Show & 2-Phase

OFFICIAL USE

Entry # _____
Date Received: _____
 Coggins/Rabies Payment

One Horse/Rider per Entry. Send to Show Secretary w/ Payment and Coggins/Rabies

Rider Name	Status: <input type="checkbox"/> Open <input type="checkbox"/> AA <input type="checkbox"/> JR. (DOB): _____
Address	
Phone	Coach:
Email	Affiliation: <input type="checkbox"/> SMDA <input type="checkbox"/> MDS <input type="checkbox"/> CMDA <input type="checkbox"/> MeCTA

Horse Name			
Breed	Height	Color	Sex <input type="checkbox"/> Mare <input type="checkbox"/> Gelding <input type="checkbox"/> Stallion
D.O.B	Coggins Date	Name of Horse's Owner	

Class #	Class Name	Entry Fee	Full Payment must be included with entry	
		\$		
		\$	Subtotal Class Fees	
		\$	Office/Grounds Fee	\$20.00
		\$	Non-Member Fee (\$10.00)	
		\$	TOTAL FEES	

THIS IS A RELEASE OF LIABILITY. PLEASE READ CAREFULLY BEFORE SIGNING. WARNING – Under Maine law, an equine professional has limited liability for an injury or death resulting from the inherent risks of equine activities.

The undersigned rider, owner, and signing parent or guardian hereby agrees: I am fully aware that horse sports and competition involve inherent dangerous risk and I expressly assume any and all risks of injury or loss suffered during or in connection with the competition and I agree to release the dressage club, or other organization sponsoring this competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held, from any loss, damage, liability or injury arising out of or resulting from this competition or rider's participation or entry therein, whether or not such injury or loss resulted directly or indirectly from the negligent acts or omissions of the management of the competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held. In the event of injury to the rider or rider's animal permission is hereby granted for emergency medical treatment for rider or rider's animal.

I further agree to indemnify, hold harmless and defend the dressage club or other organization sponsoring this competition, the management of the competition, and their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held from and against any and all claims for loss, damages, liability, injury, or death, however caused, resulting directly or indirectly from the rider's entry or participation in this competition or from acts or omissions of rider or rider's agents. I further agree to be subject to the rules of the dressage club or other organization sponsoring this competition.

SIGNATURES ARE MANDATORY Entry is not accepted without mandatory signatures, full payment, legible proof of Coggins, and other prize list requirements. SIGNATURES ACKNOWLEDGE ACCEPTANCE OF PRIZE LIST REFUND POLICY.

RIDER Signature _____ Print Name _____
OWNER Signature _____ Print Name _____
PARENT Signature _____ Print Name _____

(mandatory if rider is under 18)