

2021 CDHJC ANNUAL HORSE SHOW

OWNER				HORSE	Height	Horse/Pony		
						Sm	Md	Lg
RIDER NAME(s)	AGE	CDHJC Mbr #	TCRA Mbr #	CLASSES				
					**Entries for Symmes Class require showing current CDHJC 2018 membership card			
#1								
#2								
#3								

By signature below, participants, owners and trainers agree they voluntarily participate in the competition fully aware that horse sports and the competition involve inherent dangerous risk of serious injury or death, and by participating they expressly assume any and all risks of injury or loss, and they agree to indemnify and hold the CDHJC, Stockade Polo & Saddle Club, Inc., the competition, officials, directors, employees and agents harmless from and against all claims including for any injury or loss suffered during or in connection with the competition, whether or not such claim, injury or loss resulted directly or indirectly, from the negligent acts or omissions of said officials, directors, employees or agents of the competition.

Signatures below indicate that each of us has read and understand the above

OPEN CHECK and SIGNATURE REQUIRED BEFORE ENTRY # will be issued. Checks payable to "CDHJC"

ALL STALLS MUST BE PRE-PAID with this Entry form and Received by July 31.

Please mail entry form to:

**CDHJC c/o Karen Hurff
Skidmore College
815 North Broadway
Saratoga Springs, NY 12866**

STABLING	\$185 x ____ = _____
CDHJC Membership	\$ ____ x ____ = _____
CLASS ENTRY FEE	\$ 25 x ____ = _____
CLASS ENTRY FEE	\$ 30 x ____ = _____
CLASS ENTRY FEE	\$ 50 x ____ = _____
SCHOOLING FEE	\$ 15 x ____ = _____
OFFICE/EMT FEE	\$ 15 x <u>1</u> = \$15.00
Horse Watch	\$ 15 x ____ = _____
Total Amount Due	\$ _____

STABLE WITH: _____

	Name	Address	Email/phone @ show	Signature (parent if minor)
Owner			Email: _____ Phone: _____	
Trainer			Email: _____ Phone: _____	
Rider 1			Email: _____ Phone: _____	
Rider 2			Email: _____ Phone: _____	
Rider 3			Email: _____ Phone: _____	