



2010 Dressage Schooling Show
Clarcona Horseman's Park
3535 Damon Road
Apopka, Florida
June 6 – Judge: Bill Woods, USEF “R” Graduate

1. Introductory Level Test A, Junior *
2. Introductory Level Test A, Senior *
3. Introductory Level Test A, Open
4. Introductory Level Test B, Junior *
5. Introductory Level Test B, Senior *
6. Introductory Level Test B, Open
7. Training Level Test 1, Novice **
8. Training Level Test 2, Novice **
9. Training Level (Specify Test)
10. First Level and Above (Specify Test)

** open to riders who are new to dressage*

*** open to horses and riders who have not scored 60% or higher*

FEES (Closing date is 5/24/10):

\$20.00 OAHC Members per test / \$25.00 for Nonmembers per test

\$25.00 OAHC Members per test after closing date / \$30 Nonmembers per test after closing date

\$28.00 stall fee MANDATORY per park.

\$15.00 fee for rider changes

\$5.00 office fee

Current negative coggins necessary to enter premises

PLEASE REGISTER EARLY LIMITED NUMBER OF RIDES AVAILABLE, NO REFUNDS!!

Ride times will be available on 6/3/09 and email to participants. Please supply email address on entry form.

Contact Solita Baptiste 407-267-2572 to pre-register or mail entries to Solita Baptiste, 4375 North CR 426, Geneva, Florida 32732.

OAHC Membership – is available to all participants & horses for \$25/year for individual membership which entitles members to High Point Awards, member discount for classes, clinics, seminars, trips. Family memberships are also available. Membership forms available at club website or in show office. Family memberships \$35.00

Highpoint:

OAHC Members Only!!

(See Membership Information below)

Intro Division: Jr and Sr (for riders riding Intro A or B test only)

Train Division: Jr and Sr (for riders riding training level tests)

Orlando Arabian Horse Club / Dressage Show Registration Form
ONE FORM FOR EACH HORSE AND RIDER COMBINATION

All Information MUST be Completed for Registrar **Show Date:** _____

HORSE NAME: _____ **Reg #:** _____

Breed: _____ **Color:** _____ **Age:** _____ **Sex** **M** **G** **S**

RIDER'S NAME: _____ **Rider's D.O.B.** / / **Email:** _____

Mailing Address: _____

City/State/Zip: _____ **Phone:** _____

Emergency Contact: _____ **Phone:** _____

High Point Horse Division **Intro Sr.** **Intro Jr.** **Train Sr.** **Train Jr.** *(OAHC Members Only)*

OWNER OF HORSE: _____ **Phone:** _____

Complete Address: _____

(Circle Rates that Apply)

Horse and/or Tack Stalls \$28.00 per stall _____ x \$28 <small>(According to Clarcona Park Rules, ALL horses must be stalled. Tack Stalls are optional.)</small>	TOTALS
	\$ _____
*If stall fee for this horse is on another rider's registration sheet, specify Rider's Name: _____ Office Fee: \$5.00 per entry	\$ 5.00
Membership Fee for 2010 \$35 Family \$25 Single <i>(Optional)</i>	\$ _____

Specify Tests You Wish to Ride *(Examples are provided in the first row.)*

Intro A Jr	Intro A Sr	Intro A open	Intro B Jr	Intro B Sr	Intro B Open	Train Test1 Novice	Train Test2 Novice					

Test Fees: Member: _____ x \$20 **NonMember** _____ x \$25 **After Closing Date Member:** _____ x \$25 **NonMember:** _____ x \$30 \$ _____

\$15 fee for changes of rider after closing date \$ _____

OFFICE USE ONLY **CHECK OR CASH TOTAL MUST BE PAID BEFORE SHOW BEGINS**

COGIN # _____ DATE: _____

Equine Coggins Paper Verified by: _____ TOTAL AMOUNT DUE: \$ _____

Release Form Signature Verified by: _____

Check Rec by: _____ Amount \$ _____ Check # _____

Cash Rec by: _____ Amount \$ _____

EQUINE ACTIVITY SPONSOR RELEASE

Know all men by these presents, that

_____, who resides
(Rider's Name)

at _____
(Address)

(City, State, & Zip)

(hereinafter referred to as "PARTICIPANT", desires to engage in and does herby engage in the following equine activity, to wit:

Orlando Arabian Horse Club Dressage Show Held at Clarcona's Horseman Park

_____, 2010

FOR AND IN CONSIDERATION OF THE ABOVE ACTIVITIES, SERVICES AND ENTRY FEES PAID, receipt and sufficiency of which is acknowledged, PARTICIPANT hereby does forever and finally release, remise, acquit, satisfy and forever discharge the Equine Activity Sponsor of and from all manner of actions, cause of action, suit, debts, sues, sums of money, bonds, billings, contracts, controversies, agreements, promises, damages, variances, judgements, executions, claims, and demands whatsoever in law or in equity which may arise or might in the future arise or herein after for or against the Equine Activity Sponsor for the activities as stated above.

This document is meant to be a full and complete release from and all liability that may arise from participation in the above described equine activity. This release is given freely and voluntarily by the PARTICIPANT and is meant to remain in existence throughout the duration of the equine activity.

WARNING:

Under Florida Law, any equine activity sponsor or equine activity professional is not liable for injury, or the death of, a PARTICIPANT in equine activities resulting from the inherent risks of the equine activities.

DATED THIS THE _____ DAY OF _____, 2010

(PARTICIPANT SIGNATURE)

(LEGAL GUARDIAN...IF PARTICIPANT IS A MINOR)

(ACCEPTANCE OF EQUINE ACTIVITY SPONSOR) 1993. The Sunshine Horse Council

