

Blue Goose Stable, LLC

**Dressage Entry Form**

Please make copies: One horse per form.

**Mail entries to:** Blue Goose Stable, LLC  
210 White Horse Rd  
Cochranville PA 19330

**OFFICE USE ONLY**

Bridle Number: \_\_\_\_\_  
Paid ck: \_\_\_\_\_  
Coggins Report: copy enclosed: Y / N  
State: \_\_ Accession #: \_\_\_\_\_  
  
Rhino / Flu Vaccination Date: \_\_\_\_\_

**Date of Competition:** \_\_\_\_\_

<b>Horse:</b>	<b>Breed:</b>	<b>Gender:</b>	<b>Color:</b>	<b>Age:</b>
<b>Are you enrolled in the BGS Year End Program?</b>				
<b>Rider:</b>				
<b>Address:</b>				
<b>Jr: Date of Birth:</b>				
<b>Phone:</b>		<b>E-mail:</b>		
<b>Owner:</b>		<b>Address:</b>		
<b>Phone:</b>		<b>E-mail</b>		
<b>Class</b>	<b>Class Description: / Level/Test/Division Jr, AA, Open ( if entries warrant)</b>			

<b>Total test fees @ \$25.00 / test x _____ tests =</b>	\$
<b>Late Entry \$25.00</b> ( post mark after close date)	
<b>Total Entry Fees</b>	\$

**Warning: Under Pennsylvania law an equine professional and equine activity sponsor is not liable for an injury to or death of a participant in equine activities resulting from the inherent risks of equine activities.**

I/We acknowledge that equine activities are a high risk activity. In consideration of the acceptance of this entry, whether I am mounted or un-mounted, I release and in addition hold harmless Blue Goose Stable, LLC & Yarmouth Stables, LLC , it's owners and agents, of and from any and all claims and demands of every kind which I may have or hereafter acquire for bodily injury, death, or property damage and from all liability for negligent acts or omissions.

Signed Rider: \_\_\_\_\_ Date: \_\_\_\_\_ (Parent or Guardian , if rider is under 18)

Signed Owner: \_\_\_\_\_ Date: \_\_\_\_\_