

# Blue Goose Stable, LLC

## Dressage Series 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

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

### Show Year 2019

Date of Competition (circle one): April 20 ~ May 4 ~ June 22 ~ July 20 ~ Aug 10 ~ Sept 7 ~ Oct 19 ~ Nov 23 ~ Dec 7

Horse:	Breed:	Gender:	Color:	Age:	Willing to Volunteer? YES / NO
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**PLEASE PRINT LEGIBLE**

Rider:

Address:

Jr: Date of Birth:

Phone: E-mail:

Owner: Address:

Phone: E-mail

Class #	Level / Test(s)	Division Description	JR / AA / Open / Master

Dressage Test(s) _____ @ \$30.00 / Test Musical / Pas Duex / @ \$40.00 / Test	\$
Late Entry \$25.00 (Received AFTER close date)	Late Fee \$ Total Entry \$
<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, 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: \_\_\_\_\_