VERNON DISTRICT RIDING CLUB
SPRING SHOW
8:00 A.M. SUNDAY, APRIL 17, 2011

Please print. A separate entry form is required for each horse/rider combination.

Name of Horse/Pony: _____ Height: _____
Name of Rider: _____ Birthdate (if under 19 yrs.): _____
Address: _____
City: _____ Prov: _____ Postal Code: _____ Phone: _____
Rider's Email: _____ Name of Trainer: _____
Name of Owner: _____ Email: _____
Address: _____
City: _____ Prov: _____ Postal Code: _____ Phone: _____

CLASSES: ____/_____/_____/_____/_____/_____/_____/_____/_____/_____/_____/_____/_____/_____/_____/

FEES:

Number of classes entered:	_____	X	$8.00	_____
Covered Stall Fee per day*:	_____	X	$25.00	_____
Covered Stall Fee per day*:	_____	X	$20.00	_____ VDRC MEMBERS ONLY RATE
Pen Fee per day:	_____	X	$12.00	_____
OR Grounds Fee per day:	_____	X	$ 5.00	_____
Administration Fee:				$10.00

TOTAL FEES: _____
(Please make cheques payable to VDRC.)

*Limited number of Covered Stalls available * Out of Town Members Will be given first choice

PLEASE ATTACH PROOF OF YOUR HCBC MEMBERSHIP CARD FOR 2011

NO PHONE OR FAX ENTRIES.
CHEQUES (payable to Vernon District Riding Club) MUST ACCOMPANY ENTRY FORM.
ENTRIES CLOSE APRIL 11, 2011
Please send entries to:
Nathalie Merrill
6900 Cosens Bay Road
Coldstream, BC V1B 1N8
Phone: (250) 308.8138

I hereby certify that every horse and/or rider is eligible as entered and agree for myself and my representatives to be bound by the constitution and rules of HCBC at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless HCBC, VDRC, the competition, their officials, organizers, agents, employees, and their representatives. VDRC will not be held responsible for any injuries, damages, and/or loss that might occur to any horse, rider, and/or equipment during this competition. Parents and owners will be responsible for any damage done by the contestant to VDRC grounds, other participants, and/or surrounding area. Presentation of this signed form will deem acceptance of this agreement.

Rider's Signature: _____ HCBC#: _____

Owner's Signature: _____ HCBC#: _____

Parent's/Guardian's Signature (if rider under 19 years): _____

Number

(Office use only.)