



Show Manager: Zuzana Parrette
 Old Stone Riding Center
 2920 Minton Road, Hamilton OH 45013
 (513) 259-3183
 OldStoneRidingCenter.com

OLD STONE RIDING CENTER ENTRY FORM

OldStoneRidingCenter.com

ONE HORSE/ONE RIDER PER FORM. *Please Provide Proof of Negative Coggins*

Date of Show _____ Name of Show _____

Class Number	Class Description (Division(s) for CT)	Entry Fee
		\$
		\$
		\$
		\$

Late Fee: \$15.00 per horse/rider combination for entries received after the closing date. All late entries based on availability

Ride times will be provided ~ 48 hours prior to the show on OSRC facebook page. We will also text our competitors individually as able.

We are using current USDF & USEA Dressage Tests

Subtotal Class (Division) Fee	\$ _____
EMT/Office Fee	\$ 25.00
Stabling Fee (\$40)	\$ _____
Bedding bag (show day) \$10	\$ _____
Late Fee (\$15 as needed)	\$ _____
OSRC Coach/Horse Fee (\$30) (OSRC Students)	\$ _____
TOTAL FEES	\$ _____

ALL RIDERS MUST WEAR APPROVED HELMETS WHEN MOUNTED

I understand that equestrian sports are inherently dangerous and I am participating at my own risk. I am willing to assume this risk involved to myself, my family, my horse(s), guests, my vehicles and additional property. I hold the organizers of this show, their volunteers, officials, property owners, sanctioned bodies, and anyone else involved in this show harmless for any damage, loss, or injury suffered while on the show grounds. I have read and fully understand this release and consent to these conditions to enter this show. This agreement is made in the state of Ohio and shall be enforced and interpreted under the laws of the State of Ohio.

Musical Ride? Please specify Arena Size: (circle) **Standard or Small Specify Level:** _____
 (Pas de Deux & Quadrille Riders- Please submit forms together, but please note: EACH rider must submit entry form & fees). Names of your Musical Ride partners: _____

Rider's Name _____ Horse's Name _____
 Address _____ City, State, ZIP _____
 Telephone _____ E-Mail _____
 Trainer/Coach name _____ E-mail: _____
 Signature _____ Print Name _____

(Parent Or Guardian MUST sign if the rider is under 18)

Mail entry and checks payable to Old Stone Riding Center
 If e-mailing entry, then VENMO only; entry accepted only AFTER payment received
CLOSING DATE IS 7 DAYS PRIOR TO SHOW DATE