

TWIN RIVERS SADDLE CLUB 2019-2020 ENTRY FORM



BACK NUMBER

Complete one form per horse/rider entry.

Show Date: _____

Rider Name: _____ Age: _____

Coggins/Registered Horse Name: _____

Trainer & Stable Name: _____

Emergency Information (Name, Cell, Allergies etc.):

DESCRIPTION	FEES
Office fee and EMT(per horse/ rider combination)	\$20
Annual Membership: ()\$30/Individual membership () \$30/Trainer membership () \$40/Family membership	
Schooling: _____	\$20
Sponsorships / Donations:	
Replacement Number Fee # _____	\$5/each
Non-competing Horse Fee # _____ (No office/grounds fee for non-competing horse)	\$15/each
Derby/Command 400____ 500____ 600____ 700____ 800____ 801____	\$25/each
Please List Class Numbers Below:	
	\$12/per class
	or
	\$80/ flat rate
Total Number of Vouchers Submitted # _____	\$12/each

Photo Release: The above listed rider, parent and/or guardian (if rider is under 18) coach, and horse owner hereby grant my permission for Twin Rivers Saddle Club to use photographs, video tape or any other records of Twin Rivers Saddle Club events, including my name, likeness, or voice for any legitimate purpose for the promotion for Twin Rivers Saddle Club without compensation or remuneration to myself, my heirs, executors or assigns.

Warning: Under Florida Law, an Equine sponsor or Equine professional is NOT liable for any injury to or Death of a Participant in Equine activities resulting from the Inherent Risk of Equine activities. I have read the above statement and do hereby sign as the participant or parent or guardian of a Minor participant (under 18 years).

Signature: _____
Parent, Guardian or Responsible Party Signature (Required if member under 18)

It is the Exhibitor's, Parent's and Instructor's responsibility for knowledge of all Twin Rivers Saddle Club By-Laws and General Rules. TRSC Membership required to show and/or school.