



**SCDCTA Winter Schooling Show**  
**Pine Tree Stables**  
 1625 Sanders Creek Road  
 Camden, SC 29020



**ENTRY FORM**

Rider Name: \_\_\_\_\_ Rider Birthdate if Junior or Young Rider: \_\_\_\_\_

Please check one: Jr/Yr (Under 22 yrs of age) \_\_\_\_\_ or Sr (Over 22 yrs of age) \_\_\_\_\_

SCDCTA Member #: \_\_\_\_\_ SCDCTA Horse Registration #: \_\_\_\_\_

Horse Name (As shown on the Coggins Report): \_\_\_\_\_ Date of Coggins (EIA) Report: \_\_\_\_\_

Parent/Guardian Name (if rider is under 18 yrs of age): \_\_\_\_\_

Rider Address: \_\_\_\_\_

Rider City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Class #	Class Description	Fee
		\$
		\$
		\$
		\$
		\$
	Class Fee(s) Sub-total	\$
	Office Fee	\$ 10.00
	Emailed Entry Additional Fee – \$5	\$
	Late Fee - \$15	\$
	Guest Horse - \$20	\$
	Total	\$

**HOLD HARMLESS AND LIABILITY STATMENT**

I am aware that riding horses is an athletic event, which potentially poses a serious risk of injuries to myself and to my horse. I understand that I, or my horse, may be injured as a result of my negligence, the negligence of others, or through no fault of my own or anyone else due to the activity in which I am going to be engaged. I hereby agree to hold harmless SCDCTA, Pine Tree Stables, Carol Freligh, Lynn Conto, or any member therein, any volunteers or any other participants for any injuries, including death, which I or my horse may sustain while participating in this event.

\_\_\_\_\_  
 Rider/Competitor Signature (or Parent/Guardian if rider/competitor is 17 or younger)      Date

