2017 In-Gate Eventing

Entry Form

(Do not use this form for USEA/USDF or Schooling Eventing)

SEND TO: BCHP P.O. Box 386, Revere, PA 18953

Email: office@BucksCountyHorsePark.org Phone: 610-847-8597 Fax: 610-847-5507

Circle XC Level: Starter Elementary Beg Novice

Circle Stadium Level: Starter Elementary Beg Novice

Office Use	Bridle #

Event Date: _____

Dressage Only Test _____

Rider	**DOB**	**BCHP #**
Horse	**Age**	**Height**
Email (required)		
Address		
Day Phone/Cell phone		
Emergency Contact & Phone		
Scheduling Concerns (Trailing/someone, riding 2 horses)		

Division	HT	**BCHP members deduct $5.00 from HT entry fee.**
Starter	$55	
Elementary	$55	
Beg Novice	$55	
Dressage Fix-a-test	$30	
Dressage Only	$20	
Stadium Round	$15	
XC Round	$20	
Total Enclosed		

Entry Info-Checks to BCHP	
Release signed __	*Coggins (or on file)*
_____*Credit card payment* _____*Check included* *FOR CREDIT CARD PAYMENT AN E-INVOICE WILL BE SENT TO EMAIL ADDRESS PROVIDED*	

Please review the official prizelist for all rules/regulations and information. All changes are at management discretion.

Release: I understand that horse sports may be hazardous and dangerous, even leading to permanent injury or death, and I assume any and all risk of loss or injury to myself, my animals and equipment, etc. and agree to hold harmless, regardless of negligent acts or omissions, Bucks County, the Bucks County Horse Park, organizers, show committee, all horse show personnel, and volunteers.

_____

Signature of Competitor Date

_____

Signature of Parent/Guardian Date