2020 In-Gate Eventing Entry Form

(Not for use for USEA/USDF or Schooling Horse Trials)

Mail to: BCHP, P.O. Box 386, Revere, PA 18953

Email: administrator@buckscountyhorsepark.org Phone: 610-847-8597 ~ Fax: 610-847-5507

Date: _____ Dressage Only Test:_____

XC Level (circle): Starter Elementary Beginner Novice

Stadium Level (circle): Starter Elementary Beginner Novice

Rider:	DOB:	BCHP #:
Horse:	Age:	Height:
Email:		
Address:		
Phone:		
Emergency Contact #:		
Scheduling Concerns:		

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

Release_____ Coggins _____ Payment_____ CC or Check

$55 Non-Member, $50 Member
Includes 1 dressage test, XC and stadium round
Dressage only: $25 Stadium or XC only: $20