

PINK STAR EQUESTRIAN CENTER SHOW ENTRY

EVENT DATE: _____

RIDER: _____ **Date of Birth:** _____

Address: _____

Phone: _____ **Email:** _____

Name of Horse	Breed/Age/Sex/Ht/Color	Class#	Entry Fee
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total fee enclosed (Payable to: FCDA) : _____

Entries only considered complete with signature, negative Coggins, and full payment.

I enclose a total of \$ _____ for the aforementioned entry, which is made at my own risk and subject to the conditions of PINK STAR EQUINE & STABLE, LLC. I agree to abide by the rules which cover this event as set forth by the USEF.

Release: I understand that this is a high risk sport and am participating at my own risk. I hereby release and hold harmless PINK STAR EQUINE & STABLE, LLC, its owners and employees, organizers, judges and officials from any and all accidents, damages, injury, loss, or illness to horses, owners, riders, employees, attendants, spectators, or any other personal or property loss suffered during or in connection with this event.

YOU ASSUME THIS RISK OF EQUINE ACTIVITIES PURSUANT TO PENNSYLVANIA LAW.

I understand and agree to the above agreement and release.

SIGNATURE: _____ **Date:** _____

Parent or guardian must sign for riders under the age of 18.