

ONE HORSE/RIDER COMBINATION PER ENTRY FORM

**Rider Information**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Phone at Show: (\_\_\_\_) \_\_\_\_\_  
 Fax: (\_\_\_\_) \_\_\_\_\_  
 Email: \_\_\_\_\_  
 USEF No: \_\_\_\_\_ USDF No. \_\_\_\_\_  
 CDS No. \_\_\_\_\_ Inland Community Chapter? Yes  No   
 Birth day Jr/YR \_\_\_\_\_

**Owner Information**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Phone at show: (\_\_\_\_) \_\_\_\_\_  
 TIN/SNN (Required for Prize Money) \_\_\_\_\_  
 Email: \_\_\_\_\_  
 USEF No: \_\_\_\_\_ USDF No. \_\_\_\_\_  
 CDS No. \_\_\_\_\_

**Trainer Information**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ USEF No \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
 Phone at Show \_\_\_\_\_  
 COACH \_\_\_\_\_ USEF No: \_\_\_\_\_

**Dressage Getaway, Inc.**  
*Level 3 Show*  
**January 13-14, 2017 closing date: 12/17/2016**

**Make checks payable to: Dressage Getaway, Inc.**  
 Mail Entry Forms to: Siobhan Barker  
 53363 NW Hayward Rd,  
 Banks, OR 97106-8830  
 Email Entry Forms to: [Siobhan@haywardfarm.com](mailto:Siobhan@haywardfarm.com)  
 Fax Entry Forms to:  
 503 748 4730 Attn. Chris Main

SIGNATURES ARE MANDATORY. SEE BACK OF ENTRY FOR ALL SIGNATURES.

**Horse Information**  
 Name: \_\_\_\_\_  
 Breed: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_  
 Color: \_\_\_\_\_ Height: \_\_\_\_\_  
 Sire: \_\_\_\_\_ Dam: \_\_\_\_\_  
 USEF No. \_\_\_\_\_ USDF No. \_\_\_\_\_

**Stabling Information**  
 Stable with: \_\_\_\_\_  
 Arrive: \_\_\_\_\_ Depart: \_\_\_\_\_  
 No. of Stalls \_\_\_\_\_ Tack Stalls: \_\_\_\_\_

\$125 Permanent stalls 12 x 12 (Thus – Sat) Additional Days – Wed, and Sun @ \$25 a day  
**Mandatory Fee 2 bags of shavings per stall.**  
 Tack stalls 12 x 12 \$125 (Thur-Sat) Additional Days – Weds or Sunday @ \$25 a day

**Credit Card #** Visa  MasterCard  Discovery  AMEX

**Expiration Date:** \_\_\_/\_\_\_ Security Code (on back)

**Print Name** \_\_\_\_\_  
**Sign Name:** \_\_\_\_\_ **zip code** \_\_\_\_\_

**CARDS NEED TO BE SWIPED @ HORSESHOW OFFICE!! BRING TO SHOW TO AVOID FEES!!!!**

Check No. \_\_\_\_\_  
 Amount \_\_\_\_\_

Class Numbers	Division O, J, A)	Qualifying add \$10	Fee
<b>TOTAL CLASS FEES</b>			

<b>Mandatory Fees</b>	
USEF Fees (\$8 USEF Fee + \$8 Drug Fee)	<b>\$16.00</b>
CDFA Drug Fee	<b>\$5.00</b>
CDS Travel Grant Fee	<b>\$3.00</b>
Administrative Processing Fee	<b>\$41.50</b>
Mandatory Facilities Fee - 2 bags of shavings per occupied stall	<b>\$20.00</b>
<b>Other fees (if applicable)</b>	
USEF Non-member Fee	\$25
USEF Non-member Fee	\$30
Non-Competing Horse Fee see rule #19	\$100
Add drug fee per horse	
Total Stabling Fee (from left)	
Daily Haul-In fee	\$50
Additional Shavings # _____ bags \$10 per bag	
RV Parking (Thu-Sat)	\$125
Additional Days \$25	
Late Entry Fee	\$50
Faxed, e-mailed or incomplete entries \$15/ or Other fees Vendor \$150-\$200 (see page 6)	
High Point Sponsors or Donated Prize for winners name class(s) or division _____	
<b>TOTAL DUE</b>	<b>++</b>