



2017 Dressage Schooling Show Series
Sunday, March 26

Judge: Sarah Silva ~ Manager/Secretary: Stacey Collier

(775) 849-1600 * Fax: (775) 849-1611 * 4200 Old Hwy 395 * Carson City, NV 89704

CHECK TESTS ENTERED

- 1. Intro Test A ___ B ___ C ___
- 2. Training Level Test 1 ___ 2 ___ 3 ___
- 3. First Level Test 1 ___ 2 ___ 3 ___
- 4. Second Level Test 1 ___ 2 ___ 3 ___
- 5. Third Level Test 1 ___ 2 ___ 3 ___
- 6. Fourth Level Test 1 ___ 2 ___ 3 ___
- 7. Prix St. George ___
- 8. Intermediate I ___
- 9. Intermediate II ___
- 10. Grand Prix ___

Entry Fee is \$25 Per Test. Show Entries Due: Show #1: 3/17

\$30 Per Test for Late Entries. \$10 Schooling Fee for Non-Competing Horses.

Entries will not be accepted if incomplete or without a check for the full amount. Entries accepted on a first come first serve basis. Late entries will be accepted if timing permits. Ride times will be emailed 3 days prior to show. Awards to first and ribbons through fifth. All riders and horses on the property must have a signed release and entry number. Contact FMEF directly for stabling.

**MAKE CHECK PAYABLE TO "STACEE COLLIER" FOR FULL AMOUNT
AND MAIL WITH COMPLETED ENTRY TO:**

Stacey Collier * 13115 Companion Ct. * Reno, NV 89511

Horse _____ Owner _____
 Age _____ Breed _____ Color _____
 Rider _____ Trainer _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

Tests Entered _____

Total # Tests _____ x \$ _____ = \$ _____

Special Fees: \$20.00 Office Fee _____ \$10.00 Non-Competing Horse _____

Total Amount Due \$ _____

WAIVER AND RELEASE

I, the undersigned, acknowledge that as a rider/competitor, I am subjecting myself to certain inherent risks of injury and damage to either horse or rider, or equipment. Knowing these facts, I nevertheless, in consideration of you accepting me as a competitor, do hereby for myself, my heirs, executors, and administrators, agree to waive, release and hold harmless Franktown Meadows, Inc., their employees, agents or representatives, paid or unpaid, from any accident, death, injury, damage, or theft that might occur to me, my horses, family, friends, or personal belongings while at Franktown Meadows.

I HAVE READ THE ABOVE STATEMENT AND DO UNDERSTAND MY RIGHTS THEREOF.

Signature of Rider _____ Date _____

Signature of Parent/Guardian _____ Date _____