



Open Dressage & Trail Show

ENTRY FORM

Rider Name: _____

DOB: _____

Address: _____

Email address: _____ Phone No: _____

Horse's Name: _____

Trainer/Stable Name: _____

4-H Club (if applicable) _____

Emergency Contact Name and Phone No: _____

Dressage Test: _____

Trail: _____

\$30 x number of classes = _____

Less \$10 for 4-H Member -\$10 (If applicable)

Total = _____

Please make checks payable to Harmony Equestrian Center. A PayPal may be sent to you with a 4% convenience fee

Or follow this link to register and pay on line today! <https://form.jotform.com/251493858350060>

Or scan this QR code

