



Eastern Michigan Arabian Association

Open Breed- Dressage

Show Date: _____

➤ Use one entry form for every horse/rider combination ◀

Horse's Name: _____

Rider: _____

Owner: _____

Rider's Address: _____

Trainer Name: _____

City/State/Zip: _____

Trainer Telephone: _____
(adult on show grounds with responsibility for horse)

Rider's Phone #: _____

Rider's Email: _____

Rider's Birthdate: _____

Open Breed - In Hand Class 500; Dressage Test of Choice Classes 501 - 507

Class Number	Class Description	Enter Class	Test	Fee
	Open Breed Dressage High Score			\$0
500	Sport Horse In Hand			
501	Test of Choice 1			
502	Test of Choice 2			
503	Test of Choice 3			
504	Test of Choice 4			
505	Test of Choice 5			
506	Test of Choice 6			
507	Test of Choice 7			

Entries may be mailed to Rebecca Rett, 300 Ives Rd. Mason, MI 48854 . If paying by credit card, entries may be sent via email to dowrebec@gmail.com

Negative Coggins test dated within the last 12 months is required.

Ride times are available Sat/Sun 8am-5pm. Ride times may be chosen on the Monday prior to the show via Sign Up Genius (signupgenius.com), using emaadressage@gmail.com).

CHARGE CARDS

Card # _____

Expiration date: _____

3 digit security code: _____

Subtotal of class fees at \$25 per class	
# Stalls (Horse & Tack): _____ @ \$60/Weekend	
Open Breed Dressage High Score \$5	
Camping: _____ days @ \$30/Night	
Office Fee \$5	
<input type="checkbox"/> Make checks payable to EMAA TOTAL:	

MICHIGAN LIABILITY

I understand that entering this show, coming onto the grounds, and participating in this show are equine activities covered under the Michigan Equine Liability Act. Under the Michigan Equine Activity Liability Act, Public Act No. 351, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity.

SHOW WAIVER AND ASSUMPTION OF RISK

By signing this entry form I agree to assume all risks of injury or property damage that may occur at this show. I understand that entering this show, coming on the grounds, and participating in this show are equine activities covered under the Michigan Equine Activity Liability Act. I agree to waive any and all claims against Eastern Michigan Arabian Association, its employees, agents and volunteers for any injury to myself, my horse, my representatives or agents which may arise from participating at this show. I further agree to waive all claims for property damages which may arise from participating at this show. I agree to be bound by all the rules under which this show is conducted.

By signing below, I agree to be bound by all terms and provisions of this entry. All signatures are MANDATORY, except as noted.
(If sending form via email, signatures may be provided upon check-in)

Rider Signature

Date

Parent or Legal Guardian Signature (required if rider is under 18 yrs old)

Date