



Ethel, WA

(Please use a separate form for each entry—entry MUST BE COMPLETE.)

Event Date(s): September 10-11, 2011
 Driver: _____
 Address: _____
 City, State, Zip: _____
 ADS# _____ Email: _____
 Phone: H _____ C _____
 Owner: _____
 Navigator: _____

Approximate arrival time and date: _____
 Please stable with: _____

Training Prelim – L Prelim- Open
 Horse Pony
 Single Pair Tand/Mult

Special needs or requests? _____

Names(s) of Equine(s)	Age	Height	Color	Breed	Sex

Permission for a minor to show: Date of Birth: _____

I hereby consent to the entry of my child, _____, in this horse event and certify that I have read the foregoing representations and statements and that the same may be deemed a part thereof, and hereby accept responsibility thereunder for the participation of said minor.

Signature of Parent/Guardian: _____

Entry fee, 1 day @ \$75 Saturday Sunday \$ _____

Entry fee both days \$110 (Post entry, call first, add \$50) \$ _____

Dressage & cones only, 1 day @ \$50 Saturday Sunday \$ _____

Dressage & cones only for both days @ \$75 \$ _____

Stabling @ \$85 per stall noon Fri – 6 p.m. Sun–initial bedding. (No one-day rate.) \$ _____

No self-stalling.

Additional nights' stalling (if pre-approved) \$20 per night
 Add'l nights needed _____ \$ _____

ADS Non-Member Fee – Driver only @ \$30 \$ _____

Medical armbands @ \$10 \$ _____

Saturday Dinner @ \$18 each **Quantity** _____ \$ _____

Donation \$ _____

Current 2011 Friends of Happ's: Evgr For Sh Em

New 2011 Friends of Happ's Membership \$ _____

(Evergreen @ \$50; Forest @ \$100; Shamrock @ \$150; Emerald \$200)

TOTAL FEES ENCLOSED: \$ _____

Include ADS DISCLAIMER and a copy of your ADS card.

Show copy of negative Coggins test (w/i 6 months) for out-of-state horses (not WA and OR) before unloading.

Make checks payable to:



1489 US Hwy 12
 Ethel, WA 98542