

Barre Riding & Driving Club Versatility Clinic Registration

BRDC member _____ new _____ non-member _____

For staff only: Coggins included or shown: yes _____ no _____

Rider 's Name:

Horse Owner's Name:

Address: Street / P. O. Box:

Town: _____ State: _____

Zip Code _____

Cell Phone: _____

Email: _____

Horse's Name _____ Breed _____

Color _____ BRDC requires a negative coggins dated within 12 months of this event, for each participating horse. Please have coggins available at registration.

Coggins #: _____ Coggins Date: _____

Emergency Contact:

Name Phone number

Entry Fees: Member \$50 Non-member Adult \$60 Junior (18 & under) \$40

Total: _____

Please indicate **morning** _____ or **afternoon** _____ session. Will do our best to honor your request. I will call you if we are not able to honor your request.

Make checks payable to: Barre Riding & Driving Club. Please send copy of Coggins with Pre-Registration.
Payment must be included to hold your spot.

BRDC Annual Membership Fees: Individual: \$20.00 Family: \$25.00 Junior: \$10.00

Mail pre-entry form to: Jane Lynds 872 Wauwinet Rd. Barre, MA 01005. For more info email Jane at lyndsrsjsb@aol.com. Please sign and return Liability release form on day of clinic.