



Care From The Heart

PATH Intl. Member Center

SHOW ENTRY FORM

Dressage at Bella Rosa Stables

Schooling Show ECRDA* sanctioned

151 Oak Glen Road, Howell, New Jersey 07731

www.bellarosara.com

Telephone (732) 938-5445

One Horse per Entry Form Please write clearly!

Date of Show: _____

Rider: _____ Cell Phone _____

Address: _____

Email: _____ Trainer: _____

Circle: Jr. under 13 Jr 13-21 yr. (as of Jan 1st) Senior Starter

Horse's Name	Breed	Color	Gender	Age

If riding more than one horse, please state name of horse and class/level of other horse:

Class Name/Division/Level	Fee

ATTACH/Complete DOCUMENTS:

___ WAIVER/HOLD HARMLESS

___ Negative Coggins

___ Flu/Rhino vaccination within last 6 months

**ENTRIES WILL ONLY BE ACCEPTED
IF COMPLETE with FULL PAYMENT
AND DOCUMENTS (Above)**

FEEES ENCLOSED:

Entry (\$25/class) \$ _____

Office Fee \$ 10.00

Other Fees \$ _____

TOTAL ENCLOSED \$ _____

Make check payable to Bella Rosa Stables

For Show rules: *ECRDA (East Coast Regional Dressage Association) www.ecrda.com