



ENTRY FORM | ALL HAUNTS DRESSAGE AT SCEC OCTOBER 15-16, 2022

ONLY ONE HORSE PER ENTRY FORM | Entries must be complete with signature pages. Must provide a copy of your USEF, USDF, CDS cards for the horse, rider, owner, trainer and coach with entry form. CLOSING DATE: September 30, 2022 - EMAIL/FAX/MAIL TO: Kim Carpenter - dressageshowservices@gmail.com - FAX 931-447-3600 - MAIL 790 Blooming Grove Rd., Pulaski TN 38478 Current vaccination records must accompany all entries

HORSE INFORMATION:

Name: _____
Breed: _____
Sex: _____ Age: _____
Color: _____ Height: _____
USEF #: _____ USDF #: _____

RIDER INFORMATION:

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: (____) _____
E-mail: _____
USEF #: _____
USDF #: _____
CDS #: _____

OWNER INFORMATION:

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: (____) _____
E-mail: _____
USEF #: _____
USDF #: _____
CDS #: _____

TRAINER INFORMATION: (person responsible for horse on grounds)

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: (____) _____
E-mail: _____
USEF #: _____

COACH INFORMATION:

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: (____) _____
E-mail: _____
USEF #: _____

GREAT AMERICAN / USDF QUALIFYING

Open A/A JR/YR Birthdate: _____

STABLE WITH: _____

Table with columns: Day, Classes Entered - Specify O/AA/JR/YR/Q, Fees. Rows include: Sat., Sun., TOTAL CLASS FEES Add \$15 for each qualifying class, Mandatory USEF Federation Fee \$23.00, Mandatory Show Office Fee \$55.00, Mandatory CDFA Drug Fee \$14.00, Mandatory EMT Fee \$10.00, USEF Non-Member Show Pass Fee @ \$45, USDF Non-Member Fee @ \$35, Stabling - \$185/stall, Stabling - Tack Stall \$125/stall, Stabling - Day Stall \$60/stall, Trailer-In Fee (No Stall) @ \$45/day, Shavings @ \$16/bag or wheelbarrow, Non-Competing Schooling Horse Fee \$45, Incomplete Entry Fee \$15 (if any items are missing), Lunch Pre-order Saturday x\$20 Sunday x\$20, Late Entry \$50, TOTAL FEES DUE & ENCLOSED

- Note: All exhibitors must provide their own feed. No full service feeding options are currently available. Please see Stabling Rule Section 21
- Enter Online at www.EquestrianEntries.com
- For More Information: Kelly Carpenter dressageshowservices@gmail.com 931-452-9225 www.SouthernCaliforniaEquestrianCenter.com

FOR OFFICE USE ONLY

Date Postmarked: _____ Show Number: _____
Check Number: _____ Check Amount: _____ Balance: _____

USEF Competition EHV-1 Declaration Form

I, _____, as the owner/trainer/agent, declare that my horse(s) that arrived at _____ on _____
(Competition Grounds) (Date)

Have NOT:

- Been on any competition grounds that have or had an active EHV-1 or EHM positive case within the last (14) days.....
- Been on the grounds of, or at a private facility, barn, stable, or veterinary clinic that has or had an active EHV-1 or EHM positive case within the last (14) days.....
- Been in contact with a horse that has tested positive for EHV-1 or EHM within the last 14 days.....

Have:

- Maintained a twice daily temperature log that is available for review by competition management or Steward/TD.....

Veterinarian: _____

Veterinarian Email: _____

Veterinarian Phone: _____

Horses: (Name and USEF ID Required)

_____	_____
_____	_____
_____	_____

Trainer/Owner/Agent Responsible for the truthfulness and accuracy of the aforementioned information _____
(Signature) (Date)

If completing digitally, please download this form to add your digital signature

Name _____ Email _____