

SIGN UP FORM –GENERATION GAP VALLEY CITY SADDLE CLUB

Exhibitor Team Number _____

Horse's Name: _____

Rider 1 Name: _____

Age: _____ Member: Yes No

Classes:

12. Generation Gap W/T Pleasure

13. Generation Gap W/T Equitation

_____ **Classes x \$6/\$8 =** _____

Rider 2 Name: _____

Age: _____ Member: Yes No

Classes:

12. Generation Gap W/T Pleasure

13. Generation Gap W/T Equitation

_____ **Classes x \$6/\$8 =** _____

Class Total: _____

Stall/Grounds Fee: _____

Tack Stall(s): _____

Barn Fee: _____

Camping Fee: _____

Grand Total: _____

No refunds unless a Vet excuse is provided.

Neither VCSC, their officers, nor anyone else involved with these shows will be held responsible for any accident and/or theft of any rider, horse, visitor or equipment.

If under the age of 18, a minor **MUST** have permission to show. Parent, Guardian or Trainer must sign below.

Exhibitor/Parent/Guardian/Trainer _____ Date _____