SIGN UP FORM – W/T 19-34 VALLEY CITY SADDLE CLUB – SATURDAY

Exhib	oitor Nu	mber _									
Nam	e:										
Hors	e's Nam	ie:									
Addr	ess:										
Phone:						_ Age: Member			Member:	Yes	No
<u>\$6/</u>	\$8 Cla	asses									
5	14	20	24	26	27	36	39	41	43	45	
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No re	funds un	nless a V	et excus	se is pro	vided.						
any a	ccident a	and/or t	heft of a	ny rider	, horse	, visitor	or equip	ment.			ponsible for ainer must sign
Evhih	itor/Pare	ent/Guar	dian/Tr:	ainer						Date	