SIGN UP FORM – W/T 13 & UNDER VALLEY CITY SADDLE CLUB – SUNDAY

Exhib	itor Nu	mber _											
Name	e:												
Horse	e's Nam	ne:											
Addre	ess:												
Phone:					Age: Memb			1ember	: Yes	5	No		
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Class To													
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No re	funds ur	nless a V	et excu	se is pro	vided.								
any a	ccident a ler the a	and/or t	officers, r cheft of a B, a min	ıny rider	, horse,	visitor	or equip	ment.			-	ble for must sign	
Exhibitor/Parent/Guardian/Trainer								Date					