

OVCTA ENTRY FORM

Event Location _____ Date of Event _____

Rider Name: _____ DOB _____

Mailing Address: _____

Phone Number: _____ Are you an OVCTA Member? **Y / N**

Email _____ Are you an **Amateur** or **Professional** ?

I don't always have access to e-mail, so please call me with my ride times **Y / N**

May we add you to our email list? **Y / N** Already receive it? **Y / N**

In the event of an emergency on the day of the show, whom may we contact, and at what number?

HORSE NAME / AGE/ SEX / HEIGHT	CLASS or LEVEL	ENTRY FEES
	Non-Member? Please Add \$10	
ONLY 2 VOLUNTEER CHITS PER ENTRY PLEASE.	- Volunteer Chits – subtract \$5/chit	
	TOTAL =	

PLEASE MAKE ALL CHECKS PAYABLE TO: OVCTA

I enclose herewith a total of \$_____ for the aforementioned entry, which is made at my own risk and subject to the conditions of the organizer and the sponsoring Oley Valley CTA. I agree to abide by the rules which cover this event as set forth by OVCTA & USEF.

RELEASE : I understand that this is a high risk sport and I am participating at my own risk. I hereby release and hold harmless the Organizer, Organizing Committee, judges and officials, volunteers, the Oley Valley CTA, their officers, agents, employees and volunteers, the host and property owners from any and all accidents, damages, injury, loss or illness to horses, owners, riders, employees, attendants, spectators or any other person or property loss suffered during or in connection with this event.

**IMPORTANT: You assume the risk of equine activities
pursuant to Pennsylvania Law.**

I understand and agree to the above agreement & release.
NOTE: Parent or guardian MUST sign if competitor is under 18

SIGNATURE: _____

By initialing below, I allow OVCTA to use my image, taken of me at OVCTA activities for any and all OVCTA marketing. I understand that I will not be compensated in any way for this use. I further understand that this permission is granted indefinitely, unless I specifically revoke my permission _____