

OVCTA Open Schooling at Ludwig's Corner

May 24, 2025

Name:	Horse:
Email:	Cell:
Time Choice(s):	
11:00-12:00	
12:00-1:00	
1:00-2:00	
2:00-3:00	
	Waiver
	my own risk and is subject to the conditions of the Show Valley CTA. I agree to abide by the rules which cover thi d USEA.
and hold harmless the Organizer, Show Commit officers, agents, volunteers and employees, the	t and am participating at my own risk. I hereby release ttee, judges and officials, the Oley Valley CTA, their host and property owners from any and all accidents, rs, riders, employees, attendants, spectators or other nnection with this event.
You assume the risk of equine activities pursuan	nt to Pennsylvania Law.
NOTE: Parent or guardian MUST sign if competi	tor is under 18 years of age.
Signature	Date:
OVCTA marketing. I understand I will not be con	age, taken of me at OVCTA activities for any and all mpensated in any way for this use. I further understand ess I specifically revoke my permission. Initials: