**Kim Severson Jumping Clinic Entry**

**June 11-12, 2016**

Rider Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secondary phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_\_\_

Rider’s level of experience/highest level competed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse’s level of experience/highest level competed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Requests (e.g. scheduling, will accommodate ***if possible):*** \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you require stabling? Yes No

Payment: Your spot in the clinic is not guaranteed until your fee is paid ***in full*.** No refunds unless your spot can be filled from the waiting list. Please make checks payable to Andrea Waldo. Payment may be sent to Andrea Waldo, Triple Combination Farm, P.O. Box 195, North Ferrisburgh, VT, 05473, along with a copy of current coggins (TCF boarders excepted). If oversubscribed, priority will be determined by date of postmark.

Entry Fee: $380

Stabling ($25/night): \_\_\_\_\_\_\_

Total enclosed: \_\_\_\_\_\_\_