

Great Vista Farm
Schooling Show & Pace
556 Paris Rd
Fort Plain NY, 13339
www.greatvistafarm.com

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ENTRY FORM MUST BE ACCOMPANIED BY SIGNED RELEASE FORM

Competition Date: _____ Competition Name: _____

Rider: _____ DOB: _____

Street: _____ Town: _____

State: _____ Zip: _____ Telephone: _____ Cell: _____

Email: _____

Horse: _____

Breed: _____ Height: _____ Color: _____ Sex: _____ Age: _____

Owner's Name: _____

Street: _____ Town: _____

State: _____ Zip: _____ Telephone: _____ Cell: _____

Emergency Contact: _____

CLASS NAME or # _____ AMOUNT \$ _____

CLASS NAME or # _____ AMOUNT \$ _____

CLASS NAME or # _____ AMOUNT \$ _____

CLASS NAME or # _____ AMOUNT \$ _____

TOTAL ENCLOSED \$ _____

Please give us a brief history of your equestrian experience along with your horse's experience:

Thank you and Good Luck!