



# Thorncroft Equestrian Center Dressage Show & Combined Test

Sunday May 2, 2010

## Dressage Class List



- |                          |                         |
|--------------------------|-------------------------|
| 1. USDF Intro Test A     | 9. First Level Test 3   |
| 2. USDF Intro Test B     | 10. First Level Test 4  |
| 3. Training Level Test 1 | 11. Second Level Test 1 |
| 4. Training Level Test 2 | 12. Second Level Test 2 |
| 5. Training Level Test 3 | 13. Second Level Test 3 |
| 6. Training Level Test 4 | 14. Second Level Test 4 |
| 7. First Level Test 1    | 15. Third and above TOC |
| 8. First Level Test 2    | 16. Prix Caprilli TOC   |



## Combined Training Divisions

- |                               |                                  |                        |
|-------------------------------|----------------------------------|------------------------|
| 1. Elementary Rider.....      | USDF Intro Test B.....           | Stadium - 18"          |
| 2. Intro Rider.....           | USEA Beginner Novice Test A..... | Stadium - 2'           |
| 3. Beginner Novice Horse..... | USEA Beginner Novice Test B..... | Stadium - 2'3" to 2'7" |
| 4. Beginner Novice Rider..... | USEA Beginner Novice Test B..... | Stadium - 2'3" to 2'7" |
| 5. Novice Horse.....          | USEA Novice Test A.....          | Stadium - 2'6 to 2'11" |
| 6. Novice Rider.....          | USEA Novice Test A.....          | Stadium - 2'6 to 2'11" |
| 7. Open Novice.....           | USEA Novice Test B.....          | Stadium - 2'6 to 2'11" |
| 8. Training Rider.....        | USEA Training Test A.....        | Stadium - 2'11 to 3'3" |
| 9. Training Horse.....        | USEA Training Test A.....        | Stadium - 2'11 to 3'3" |
| 10. Open Training.....        | USEA Training Test B.....        | Stadium - 2'11 to 3'3" |
| 11. Open Preliminary.....     | USEA Preliminary Test A.....     | Stadium - 3'3" to 3'9" |

**Opens: March 8th Closes: April 23rd**  
**Times available on website April 29th**

# Thorncroft Equestrian Center

## Combined Test Entry Form

May 2, 2010

Opens: March 8th Closes: April 23rd

### Fees Enclosed

|                      |                |
|----------------------|----------------|
| Entry: \$50/division | \$ _____       |
| EMT Fee:             | \$ <u>5.00</u> |
| Late entry (\$20):   | \$ _____       |
| Total:               | \$ _____       |

### Entry Requirements:

- ◆ One Horse per form - please print
- ◆ All information is required - fill in all blanks - use N/A if necessary
- ◆ **Cost per division:** \$50 - make checks payable to Thorncroft
- ◆ \$5.00 EMT Fee.
- ◆ Extra Jumping Rounds: \$10
- ◆ **Negative Coggins** dated within 12 months of competition required with entry.
- ◆ **Only complete entries submitted with coggins and check will be accepted**
- ◆ Entries post marked **after** closing date will incur a \$20.00 Late Fee
- ◆ Entry changes after closing date - \$10 Fee
- ◆ Mail entry form with current coggins and fees to:

Thorncroft Equestrian Center  
190 Line Road  
Malvern, PA 19355



Riders Name: \_\_\_\_\_ Division: \_\_\_\_\_

Horses Name: \_\_\_\_\_ Color \_\_\_\_\_ Breed \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_

Rider Information: Please PRINT Clearly: Circle: Jr Sr Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

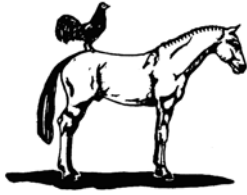
### LIABILITY RELEASE

I understand that this is a high risk sport and I am participating at my own risk. I understand that horses are unpredictable by nature and I voluntarily assume the risks and dangers involved. I hereby, intending to be legally bound, for myself, my heirs, executors or administrators, waive and release all claims for damages I may have against Thorncroft Therapeutic Horseback Riding, Inc., its Owners, Instructors, Volunteers, Aids, and or Employees for any and all injuries and or loses.

Signature of Rider: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian if Under 18: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Horse Owner: \_\_\_\_\_ Date: \_\_\_\_\_



# Thorncroft Equestrian Center

## Dressage Show Entry Form

May 2nd, 2010

Opens: March 8th Closes: April 23rd



### Entry Requirements:

- ◆ One Horse per form - please print
- ◆ All information is required - fill in all blanks - use N/A if necessary
- ◆ **Cost per test:** \$25 - make checks payable to Thorncroft
- ◆ \$5.00 EMT Fee.
- ◆ **Negative Coggins** dated within 12 months of competition required with entry.
- ◆ **Only complete entries submitted with coggins and check will be accepted**
- ◆ Entries post marked **after** closing date will incur a \$20.00 Late Fee
- ◆ Entry changes after closing date - \$10 Fee

**Mail entry to:**  
 Thorncroft  
 190 Line Road  
 Malvern, PA 19355

Riders Name: \_\_\_\_\_ Owners: \_\_\_\_\_

Horses Name: \_\_\_\_\_ Color \_\_\_\_\_ Breed \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_

Rider Information: Please PRINT Clearly: Circle: Jr Sr Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

| Class # | Class Description (Level/Test) |
|---------|--------------------------------|
| _____   | _____                          |
| _____   | _____                          |
| _____   | _____                          |

**Fees Enclosed**

|                      |                |
|----------------------|----------------|
| Test @ \$25/division | \$ _____       |
| EMT Fee:             | \$ <u>5.00</u> |
| Late entry (\$20):   | \$ _____       |
| Total:               | \$ _____       |

### **LIABILITY RELEASE**

I understand that this is a high risk sport and I am participating at my own risk. I understand that horses are unpredictable by nature and I voluntarily assume the risks and dangers involved. I hereby, intending to be legally bound, for myself, my heirs, executors or administrators, waive and release all claims for damages I may have against Thorncroft Therapeutic Horseback Riding, Inc., its Owners, Instructors, Volunteers, Aids, and or Employees for any and all injuries and or loses.

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Signature of Parent or Guardian if Under 18: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Horse Owner: \_\_\_\_\_ Date: \_\_\_\_\_