

FRRC OBSTACLES ENTRY FORM

Date: _____

Rider's Name: _____

Horse's Name: _____

This box is for Office Use Only!

1	2	3	4	5	6	7	8	9	10	Faults	Time	Final

Above is for Office Use Only!!!

- | | |
|---|--|
| <input type="checkbox"/> Standard waiver signed?
<input type="checkbox"/> Covid19 waiver signed? | <input type="checkbox"/> On file for 2020
<input type="checkbox"/> On file for 2020 |
|---|--|

Obstacle Fees: Mark your choices, please.

- | | |
|--|---------|
| <input type="checkbox"/> Practice - \$5.00 per entry | \$_____ |
| <input type="checkbox"/> Competition - \$10.00 per entry <input type="checkbox"/> for points | \$_____ |
| <input type="checkbox"/> Non-Member Office Fee - \$5.00 per horse/per event day | \$_____ |

Total Owed to enter today: \$_____

- Paid Cash Paid Check – Check # _____

Please make all checks out to FRRC.

Address: _____

Phone Number(s) _____

Signature of Rider: _____

Signature of Parent or Guardian (if under 18 years of age.) _____