

Waiver _____ Coggins _____ Payment _____

TEAM NUMBER _____

Bedford County Hunt Hunter Pace Entry Form

Adult rider fee: \$40.00 Under 18 rider fee: \$30.00

Please circle the division below that you wish your team to enter. (Choose only one.)

Full Cry Hill Topper Trail Rider Junior (at least 1 rider under age 18)

Rider Information:

Name: _____

Phone: _____

Email: _____

Address: _____

Emer Contact: _____

Emer Phone: _____

Horse Information from coggins certificate:

Horse Name: _____

Owner's Name: _____

Owner's Address: _____

Test Date (date blood drawn): _____ State: _____

Lab Accession Number: _____

Team members:
