

Springfield Dam Ride - Registration Form

Rider Name:		
Address:		
City / Zip:		
Telephone:		
Email:		
EMERGENCY CONTACT: Phone #		
Name of Horse:	Age:	Sex:
<input type="checkbox"/> Coggins/Rabies Enclosed with Entry	<input type="checkbox"/>	Coggins/Rabies Bring Day of Ride
Horse Owner (if different from Rider):		
Telephone:	Email:	

Ride 1 Day	<small>Check One</small> <input type="checkbox"/>	\$40.00	<small>Circle One</small> Saturday	Sunday
Ride 2 Days	<input type="checkbox"/>	\$70.00		
<input type="checkbox"/>	Check here if CAMPING		Arriving:	Friday Saturday
Extra Lunch Tickets:				
Saturday	<input type="checkbox"/>	How many _____	x \$10.00 = \$_____	
Sunday	<input type="checkbox"/>	How many _____	x \$10.00 = \$_____	
Ride Entry \$ _____ + Extra Lunch Tickets \$ _____ = Total				
\$ _____				

Send Entries to Ride Manager:	Lisa Keeley PO Box Perkinsville, Vermont 05151
Telephone: 802-263-5323	Cell: 203-215-0485 Email: ampl@tds.net