



7/23/2008

NICOMEN CDE ENTRY FORM

Date: Sept. 27-28, 2008

Competitor's Number

NOTE: Submit separate entry form for each horse/driver combination.

LEVEL: Training Preliminary Intermediate
 HITCH: Horse Pony Single Pair Hors Concours Other Multiple (Tandem/Four In Hand)
 Please Circle
 EVENT: CDE or Individual Competitions: Dressage Cones

Name of Horse(s)/Pony(s)	Age	Height	Sex	Breed

Disclaimer: I hereby understand that neither the Organizers, the Provincial Sport Organization, B.C. Carriage Driving Society, Equine Canada, their officers or committees, or any property owners connected with this event, accept any responsibility for any accidents, damage, injuries, illness, loss or death to any driver, horse/pony, owners, riders, grooms, navigators, employees, attendants, spectators, volunteers or any other person or property connected with or in attendance with this event. The undersigned hereby agree to be bound by the rules of this competition and make these entries at my own risk. I hereby certify that every horse/rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the Constitution and Rules of Equine Canada at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless EC, the competition, their officials, organizers, agents, employees and their representatives.

Signature of person responsible (Driver/Parent/Guardian) _____ **Date:** _____

Helmet Disclaimer...In the event that my child, _____ participates in an Equine Canada sanctioned competition where approved headgear is required for juniors, he/she will wear a properly fitted, ASTM/SEI or BSI approved helmet. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions. I hereby consent to the entry of my child in this event, and certify that I have read the foregoing representation and statements and that the same may be deemed in part thereof and hereby and accept responsibility there under for the participation of said minor.

SIGNATURE (parent/guardian): _____ **DATE:** _____

DRIVER: _____ **Birth Date (If Junior)** _____

Address: _____ **City:** _____ **Prov:** _____ **Zip/Postal Code** _____

Phone: _____ **Fax:** _____ **Email:** _____

H.C.B.C.# _____ **EC Sport License/ADS#** _____ **Signature:** _____

NAVIGATOR/GROOM: _____ **Birth Date (If Junior)** _____

Address: _____ **City:** _____ **Prov:** _____ **Zip/Postal Code:** _____

Phone: _____ **Fax:** _____ **Email:** _____

H.C.B.C.# _____ **EC Sport License/ADS#** _____ **Signature:** _____

ENTRY CLOSING DATE:

**Entries MUST be postdated no later than
September 12, 2008 - No Post Entries!**

COMPETITION FEES:

Combined Event: \$135.00 Cdn/U.S. \$ _____

Second Entry: \$100.00 Cdn/U.S. \$ _____
(two hitches/two different divisions or 2nd hitch H.C.)

Individual Competitions: \$60.00 ea. Cdn/U.S. \$ _____
(Dressage/Cones)

Horse Council Drug Fee: \$7.00 per horse \$ _____

Office Fee (separate cheque)-mandatory \$ 25.00
(refunded if entry complete upon initial submission)

Banquet Tickets:

Adults: \$20.00 Cdn/U.S. X _____ \$ _____

Children 6-12 Yrs: \$10.00 Cdn/U.S. X _____ \$ _____

Deposits: Each deposit must be on separate cheque or
money order

Camping Clean Up Deposit: \$50.00 Cdn/U.S. \$ _____

Pinney Deposit: \$20.00 Cdn/U.S. \$ _____

TOTAL FEES \$ _____

PAYMENT: Cheque Money Order

Make cheques payable to: Mission Carriage Club

Mail entries to: Carol Cody

31532 Monarch Court, Abbotsford, B.C. V2T 6M5

Ph: 604-855-6890 Fax: 604-855-6994

Email: crazycreek@telus.net

OFFICE USE:



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