			4	2S	ts *	i∂ <sub>e</sub>	Ent (Of	Entry # (Office Use Only)	
- 1			S	ta	161	es	C-SE	M	
WE	STSI	DE S							
One horse	rider per fo	orm							
Coach's N									
Rider's Na	ame.								
Address:									
City:	der if unde	n 10.	Dootol (	20do			Tolonbon	0:	
	orse Coun		Postal Code:				Telephone:  Date of Birth:		
E-Mail	JISE Court	CII #		_		Ownor	Date 01 B	II U I .	
L-IVIAII				+		Owner	5 110 #		
lumpor (	laccae:		4 0 0 4	<u> </u>	700	10 11 10	10 11 15		
Jumper C		circle	1, 2, 3, 4,	, 5, b, 	7,8, 9,	10, 11,12,	13, 14, 15		
per Jumpe		\$22.00	00.04.0		<b></b>				10
Hunter C		Circle	20, 21, 2	2, 24,	25, 26	i, 28, 29, 30	0, 32, 33, 34, 30	5, 37, 38, 41	, 42
per Hunter		\$20.00							
Per Flat C	ass	(Circle)	23, 27, 3	1, 35,	39, 40				
or		\$10.00							
Hunter D	ivision:	Circle	1 2 :	3 4	5	6			
		\$65.00							
Warm- up I	Day	\$25.00	Please ca	ll for tin	nes				
							Office/#Fee	<del></del>	\$20.00
		VISIT L	JS @				Total		
W	WW.WE	ESTSID		<b>BLE</b>	S.C	A			
							GST (5%)		
							TOTAL:		
Chegues P	avable to W	Vestside Sta	ahlas				IOIAL.		
oneques i	ayabic to V	restside ou	10100						
Waiver:									
element of risk parent, or guar equestrian acti	that an accider dian hereby ack vity at Westside d rider is eligibl	nt could occur a knowledges and e Stables and w	and result in d agrees to a aive any cla	injury or accept a ims for	r death f all risk o persona	to the rider of f negligence t al injury or los	at my own risk and their mount. The u hat may arise as a s incurred on the p horse show. ALL	indersigned ow result of partici remises. I here	ner, rider, pation in by certify that _
Signature o	f Rider:							Date:	_
0: 1	(D)			$\perp$				D (	
Signature o	i Parent or (	Guardian for	Junior:	+				Date:	

CONCESSI	ON ON GR	OUNDS			
