



Winter Schooling Day

Rider Name: _____ Horse Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Emergency Contact: _____ Number: _____

*****Approved headgear and medical armband are required for
Dressage and Jump schooling. *****

Hunter / Jumper Schooling

_____ \$20 / Hunter or Jumper round

_____ \$45 Open access Friend of the Park

_____ \$60 Open access non-Friend of the Park

_____ \$15 Grounds Fee (for any horse on the grounds not doing jumper or dressage schooling)

Dressage Schooling

_____ \$20 Friend of the Park

_____ \$30 Non Friend of the Park

Office Use Only

of Rounds: _____

Coggins _____ Release _____ Bridle # _____

Method of Payment

Total Due: _____

Checks payable to *Carolina Horse Park Foundation*

Credit Cards Accepted: (circle one) Master Card Visa American Express Discover

Credit Card Number: _____ Exp: _____ V-Code: _____

Name on Card: _____ Signature: _____

Address associated with Card: _____

City: _____ State: _____ Zip Code: _____