

Check one: **D2** ___ **D3** ___

**MIDSOUTH REGION MEGA-RALLY 2009
D2 - D3 RALLY TEAM ENTRY FORM**

OPENING DATE: April 15, 2009

CLOSING DATE: May 5, 2009

CLUB: _____ **DC:** _____ **Email:** _____

*NOTE: List members in riding order. Indicate the Captain with *. List name and club of composite team members, if known.*

TEAM		AGE as of January 1, 2009		
Capt.	Rider Name	Age	Rating	Horse Name
				STABLE MANAGER

COMPLETE ALL above entries with competitor's name, age, rating, & horse name.
 Entries MUST be **Postmarked** by the **CLOSING DATE**. NO EXCEPTIONS.
 ALL INCOMPLETE ENTRIES will be CHARGED an ADMIN. FEE OF \$5.00 PER ITEM.
 LATE ENTRIES - ADD \$25.00 PER ENTRY TO ENTRY FEE.

COACH: _____
CHAPERONE: _____

ENTRY FEES:		
Riders: _____ @ \$		\$ _____
Horse Mgrs: _____ @ \$		\$ _____
	TOTAL \$	_____

ENTRY CHECK LIST:

Include for **each** competitor the following:

- USPC Medical Release w/original signatures
- Proof of negative Coggins (within 12 months)
- Activity & Rally Release, signed
- DC Affidavit, signed
- Chaperone Form, signed
- Coaches Form, signed by the Coach
- Volunteer Form, completed (1 per team)
- Club check only, payment in full for entries

Make check payable to: Midsouth Region, USPC

As DC of _____ Pony Club, I declare that all the above named Pony Clubbers are 'Members in Good Standing' of USPC, with all National and Regional dues paid as of this date, and that the horses are their regular PC mounts in regular activities. Acting as agent for the above named riders, I certify that I have read and agree to the conditions of this competition. Signed: _____, D.C. Phone: _____

OFFICE USE ONLY

Forms Received

Med. Rel.	Coggins	Act. Rel.	DC Affidav	Chap.	Coach

Ck.#: _____

Amt. _____

Date: _____

NOTES: _____

Team Entry Complete