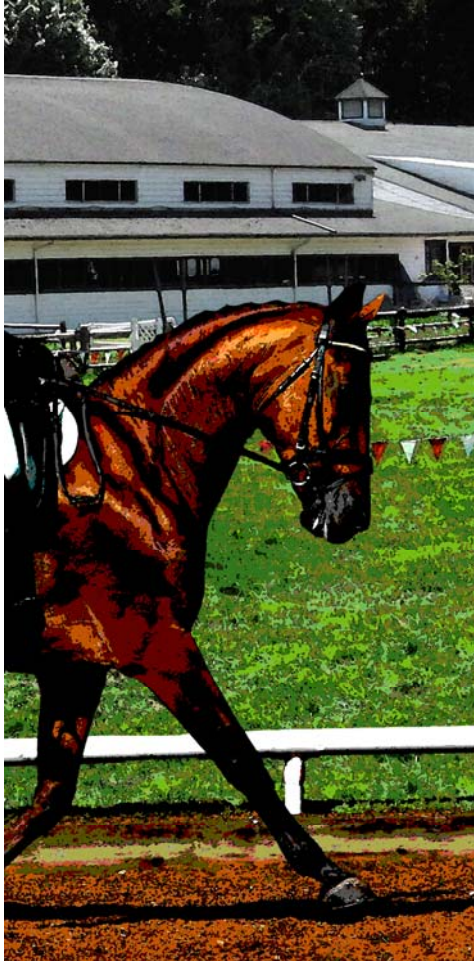




A Premier Equestrian Facility and Historic Community Landmark

LAKE OSWEGO HUNT



Dressage Schooling Show At Lake Oswego Hunt

Sunday, February 7th, 2010

Close date: February 1, 2010

Start time: 8:30 am.

Check website for ride times

Judge: Jennifer Zander

Classes:

Intro B – Training Level Test 1

Training Level Test 3

Training Level Test 4

First Level Test 1

Second Level & Above Specify Test

WATCH SUPER
BOWL SUNDAY ON
LOH'S LARGE
SCREEN TV. JOIN
US FOR THE
SHOW, FOOD,
FRIENDS & BAR

15 minute warm-ups will be scheduled every hour in the indoor arena. Tests available online at USDF.

Upcoming Clinics:

Equine Ed: - Gail Stuart-Bowles on "Know How to Wrap Your Horse for All Occasions" – Jan. 15

ODS Freestyle Clinic – Feb. 14-15: to be confirmed; please check website

Equine Ed – Dr. Lisa Campbell on "Pre-Purchase" – Feb. 19

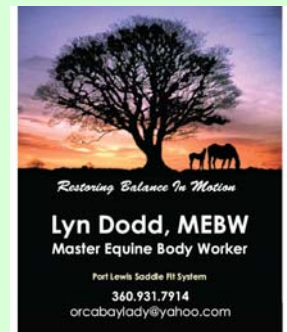
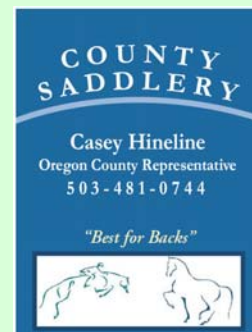
Equine Ed – Mar. 12 check website for guest speaker

DIRECTIONS

I-5 to Hwy 217 exit. East on Kruse Way to Boones Ferry. Turn right on Boones Ferry, then three blocks, turn left at Reese Rd. then left at Lake Grove Ave. to stop sign. Turn left onto Upper Drive, proceed through two stop signs. The first driveway on the left immediately after the traffic circle is Lake Oswego Hunt.

GENERAL INFORMATION

Dogs must be on a short leash and will have to leave if not well behaved. Horses must be current on vaccinations & deworming. Lake Oswego Hunt is a smoke-free facility.



LAKE OSWEGO HUNT

2725 Iron Mountain Boulevard
Lake Oswego, OR 97034
503.636.0674
www.LakeOswegoHunt.com



LAKE OSWEGO HUNT

Dressage Shows

ENTRY FORM

Office:
Pd Ck# _____, \$ _____ or CrdCd _____
Due: \$ _____

Show date: February 7, 2010 Close date: February 1, 2010.

| | |
|---|----------------|
| Name | Phone |
| Address | City/State/Zip |
| Email | |
| Signature | |
| <i>I have read and understand the agreement below</i> | |

Horse Owner: _____ Phone: _____

| Horse Name | Age | Color | Sex | Height | Classes |
|------------|-----|-------|-----|--------|---------|
| | | | | | |
| | | | | | |
| | | | | | |

Entry Fee Total \$ _____ (classes \$25 each)

Stabling \$ _____ (\$35/day; \$50/overnight) Expected arrival time: Date _____ Time _____

Schooling/Grounds \$ 10 Mandatory schooling & grounds fee (each horse/rider pair); *waived for LOH members*

Help Homeless Horses \$ _____ Would you like to donate \$2 or more to the **Equamore Foundation** to help them continue caring for abandoned, neglected, abused and aged horses in need? **Circle:** Yes or No

TOTAL: \$ _____ **LATE ENTRY fee of additional \$10 for entries received after the closing date.**

Check website for ride times. REFUNDS for scratches only resulting from rider or horse injury with vet certification. CANCELLATIONS: full refund before closing date, minus \$20 office fee if LOH is notified in writing/email at least 24 hrs prior to the event.

Release: I understand that this is a high-risk sport and I am participating at my own risk. I hereby release and hold harmless the organizer, organizing committee, judges and officials, and Lake Oswego Hunt and its directors, agents, and employees from all liability, claims or damages of any kind arising from any and all accidents, damage, injury or illness to the undersigned, or to any horses, owners, riders, attendants, spectators, or any other person or property damage suffered during or in connection with this event. **(Parent or guardian must sign if competitor is under 18.)**

Signature _____ Date _____

EMERGENCY MEDICAL RELEASE FORM

(Completion of this form is mandatory if competitor is under 18 years of age.)

If emergency care is required for _____ in conjunction with the a Lake Oswego event and if normal permission is not available in a timely manner, the undersigned authorizes appropriate emergency medical care as deemed necessary by emergency medical personnel, a physician or the medical facility providing treatment.

Parent or Guardian _____ Phone _____

If parent or guardian is not available contact _____

Family Physician _____ Phone _____

Competitor is allergic to _____

Competitor is taking the following medication _____

Signature _____ Date _____

Make checks payable to: Lake Oswego Hunt **Mail entries to:** LOH Events 2725 Iron Mountain Blvd. Lake Oswego, OR 97034 Questions? LOHShows@yahoo.com or call 503-636-0674
Download prize list and entries at www.LakeOswegoHunt.com