



BIRMINGHAM DRESSAGE AND COMBINED TRAINING ASSOCIATION

RIDER INFORMATION

Rider Name: _____ Age _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Junior (18 & under)/ Adult Amateur / Open (**circle one**)

E-mail: _____ BDCTA Member? _____

Trainer Name (for scheduling purposes)

Emergency Contact (name & #): _____

HORSE INFORMATION (use separate entry form for each horse)

Name; _____ .Age _____ Sex (M G S)

Horse Name *on Coggins* _____

Owner Name & Address (if different from Rider): _____

----- BDCTA Member? -----

CLASS INFORMATION

Class Number	Description (please indicated level/test for TOC classes)	Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTICE: Entries will not be accepted without:

Secretary Fee \$20.00

- * complete forms & full payment of fees
- * Membership form if joining BDCTA with entry, You MUST include a separate check for membership fee*

TOTAL ENCLOSED: _____

*Please make checks payable to BDCTA

Mail completed entries to:
BDCTA SHOW
Cindy Bridges
4916 Old Hickory Circle
Birmingham, AL 35244

Office Use Only
Date Received: _____
Competitor Number: _____
Complete Entry? _____
BDCTA Member?: _____
Volunteer?: _____