



CLINIC ENTRY FORM:

**LUCINDA GREEN XC RIDING
MASTER CLASS**

November 19-20, 2017 – TIEC – Mill Spring, NC

RIDER: _____

ADDRESS: _____

Cell phone

Email

Emergency Contact: _____ phone: _____

HORSE: _____ AGE: _____

LEVEL OF RIDING: (please circle) BN N T P I A

HORSE LEVEL OF EXPERIENCE: _____

STABLING REQUIRED? _____ (YES/NO) NUMBER OF NIGHTS: _____

Please make checks payable to CRF Equestrian LLC Clinic: \$385 Stall: \$50/night

Mail complete entry form/check/copy of negative coggins to:

CRF Equestrian LLC
Centerline Ridge Farm
2988 Landrum Rd.
Columbus, NC 28722

For any questions/info: cccadier@bellsouth.net
Carolyn Cadier 404-403-9865

