

Jumping Clinic Entry Form
August 20th, 2011
Mounted by 9:00 am

Submit Entry Form, Waiver, and \$75 entry fee by August 10, 2011 to:

Trena Kerr 7001 Rocky Springs Rd. Burlington, KY 41005

NAME _____

ADDRESS _____

PHONE _____

Estimated Riding / Group Level: (check one only)

_____ Intermediate jumping	Additional names for lunch
_____ Advanced jumping	1. _____
_____ Hilltopper	2. _____

Questions: call Trena Kerr at 859-250-5473

Mail entry form, signed waiver, and check payable to The Camargo Hunt to:

Trena Kerr
7001 Rocky Springs Road
Burlington, KY 41005

Office use only:

Check # _____

Signed Waiver _____