

WDAMA Online Western Dressage June-sational WDAA #21-208

Entry Form

Exhibitor Name: _____

WDAA number: _____

Horse Name and WDAA Number: _____

Address: _____

Email: _____

Classes Entered:

Horse/Rider Office Fee: \$ 10

Tests: \$25 x _____ = \$

Total Enclosed: \$

Payment

Paypal : info@wdama.org - Family/Friends or Cashiers Check

WDAMA
123 Crane Neck Street
West Newbury, MA 01985
617-281-676
Email: info@wdama.org