

NEW HAMPSHIRE HIGH SCHOOL EQUESTRIAN TEAMS

TEAM REGISTRATION • 2027

REGISTRATION DEADLINE: JANUARY 10, 2027

Completed forms must be scanned and emailed to NHHSET@gmail.com by the deadline.

REGISTRATION REQUIREMENTS

- ☐ This form must be completed in its entirety.
- ☐ All applicable signatures are required.
- ☐ The completed form must be scanned and emailed to NHHSET@gmail.com by January 10, 2027.
- ☐ Any changes to the information provided on this form will constitute a new registration form and must be completed and signed.
- ☐ All individuals listed on this form will be required to complete all applicable NHHSET paperwork defined by the Rulebook.

SECTION 1 — HIGH SCHOOL INFORMATION

Participating High School Name _____	High School Phone Number _____
High School Full Address _____ _____	Administrator / Athletic Director Name _____ _____
Administrator / AD Phone Number _____	Administrator / AD Email _____

SECTION 2 — HIGH SCHOOL EQUESTRIAN TEAM STAFF

Equestrian Team Advisor #1

Equestrian Team Advisor #1 Name _____	Equestrian Team Advisor #1 Phone Number _____
Equestrian Team Advisor #1 Email _____	Additional Contact Information (optional) _____

Equestrian Team Advisor #2

Equestrian Team Advisor #2 Name _____	Equestrian Team Advisor #2 Phone Number _____
Equestrian Team Advisor #2 Email _____	Additional Contact Information (optional) _____

Head Coach

Head Coach Name _____	Head Coach Phone Number _____
Head Coach Email _____	Additional Contact Information (optional) _____

Assistant Coach #1

Assistant Coach #1 Name _____	Assistant Coach #1 Phone Number _____
Assistant Coach #1 Email _____	Additional Contact Information (optional) _____

Assistant Coach #2

Assistant Coach #2 Name _____	Assistant Coach #2 Phone Number _____
Assistant Coach #2 Email _____	Additional Contact Information (optional) _____

SECTION 3 — MIDDLE SCHOOL INFORMATION

Complete this section only if the high school team includes participating middle school students.

Participating Middle School Name _____	Middle School Phone Number _____
Middle School Full Address _____ _____	Administrator / Athletic Director Name _____ _____

Administrator / AD Phone Number _____	Administrator / AD Email _____
--	-----------------------------------

SECTION 4 — MIDDLE SCHOOL EQUESTRIAN TEAM STAFF

Middle School Advisor #1

Middle School Advisor #1 Name _____	Middle School Advisor #1 Phone Number _____
Middle School Advisor #1 Email _____	Additional Contact Information (optional) _____

Middle School Advisor #2

Middle School Advisor #2 Name _____	Middle School Advisor #2 Phone Number _____
Middle School Advisor #2 Email _____	Additional Contact Information (optional) _____

SECTION 5 — ADVISOR & COACH ACKNOWLEDGMENT

As an Advisor/Coach of this team, I understand that I am held to the expectations outlined in **Section 1 — NHHSET Advisor/Coach Role Expectations** of the NHHSET Rulebook and agree to abide by those rules.

Position	Signature	Date
Advisor #1	_____	_____
Advisor #2	_____	_____
Head Coach	_____	_____
Assistant Coach #1	_____	_____
Assistant Coach #2	_____	_____
Middle School Advisor #1	_____	_____
Middle School Advisor #2	_____	_____

SECTION 6 — SCHOOL ADMINISTRATIVE APPROVAL

HIGH SCHOOL

I hereby authorize the above individuals to represent the High School named below in the New Hampshire High School Equestrian Teams (NHHSET) program for the year _____. As school administrator, I acknowledge and approve any additional fees our coaches may charge participants. I also acknowledge and approve any fundraising activities conducted by our team.

School Name _____	Program Year _____
Administrator / Athletic Director Signature _____	Date _____

MIDDLE SCHOOL

I hereby authorize the above individuals to represent the Middle School named below in the New Hampshire High School Equestrian Teams (NHHSET) program for the year _____.

School Name _____	Program Year _____
-----------------------------	------------------------------

Administrator / Athletic Director Signature _____	Date _____
---	----------------------

FINAL SUBMISSION CHECK

- ☐ All applicable sections completed
- ☐ All applicable signatures obtained
- ☐ Form scanned and saved for team records
- ☐ Form emailed to NHHSET@gmail.com by January 10, 2027

NHHSET@gmail.com • Deadline: January 10, 2027