

2011 Spring Kick Off Event Horse Show General Entry Form – Please fill out One 2 page form per rider –

Deadline March 25, 2011. Please send in this completed form with check attached or credit card information noted below to Joanne Bartley at 23 B Eisenhower Blvd Duncannon, PA 17022. For credit card entries you can scan the completed forms and email to Joanne at jbartley@embarqmail.com

| | | | | | | | | | |
|----------------------------------|----------------------|---------|---------|--------------|---------------------------------------|------------|-----|-----------|--------|
| Ofc. Use | Name of Horse / Pony | | | Breed Reg. # | Height | Color | Sex | Yr Foaled | USEF # |
| | | | | | | | | | |
| Name of Rider / Driver / Handler | | | | USEF # | AFFILIATION # (specify, e.g. ASHA) | | | DOB | |
| | | | | | | | | | |
| CLASS # | CLASS # | CLASS # | CLASS # | CLASS # | CLASS # | TOTAL FEES | | | |
| Fee | Fee | Fee | Fee | Fee | Fee | | | | |

Qualifier Classes are \$20 Championship Classes are \$30

| | | | | | | | | | |
|----------------------------------|----------------------|---------|---------|--------------|---------------------------------------|------------|-----|-----------|--------|
| Ofc. Use | Name of Horse / Pony | | | Breed Reg. # | Height | Color | Sex | Yr Foaled | USEF # |
| | | | | | | | | | |
| Name of Rider / Driver / Handler | | | | USEF # | AFFILIATION # (specify, e.g. ASHA) | | | DOB | |
| | | | | | | | | | |
| CLASS # | CLASS # | CLASS # | CLASS # | CLASS # | CLASS # | TOTAL FEES | | | |
| Fee | Fee | Fee | Fee | Fee | Fee | | | | |

| | | |
|---|----------------------|-----------------|
| TOTAL CLASS FEES | | \$ |
| Stalls | ___ @ \$85 | \$ |
| Grounds Fee (non-stabled horses) | ___ @ \$50 per horse | \$ |
| Hay | ___ bales | \$ Not Avail.* |
| Shavings | ___ bales | \$ Not Avail. * |
| *Contact us for price information on hay and shavings | | |
| Office Fee | ___ @ \$20 per horse | \$ |
| Camper Space, flat charge | ___ space @ \$90 | \$ |
| Sponsorship – Thank You! | | \$ |
| Sponsorships to Saddlebred Rescue 501C3 could be tax deductible. | | \$ |
| TOTAL | | \$ |

Payment:

_____ Check enclosed No. _____ for \$ _____, payable to SKOE or Saddlebred Rescue Inc, *OR*

_____ Charge my Visa or MasterCard # _____

Expiration Date: _____ Security Code: _____ Signature: _____

Name: _____

Address: _____ City: _____ State: _____ Zip Code _____

Mobile Phone: _____ Email _____

RELEASE OF LIABILITY AGREEMENT

Please Read Carefully Before Signing

I choose to voluntarily participate in the Spring Kickoff Event Horse Show, the "Competition." The Competition as used herein includes all of their officials, officers, directors, employees, agents and volunteers. I fully understand that horses can be unpredictable; that being on or around horses involves inherent dangers which can result in serious loss, accident, bodily injury pain, suffering or even death. I assume all the risk of harm involved in my participation and I agree to release the Competition and Diamond 7 from all claims for money damages or otherwise for any harm to me or my horse even if due to the negligence of the Competition or Diamond 7. I further agree to indemnify the Competition and Diamond 7, and hold them harmless with respect to claims for harm to me or my horse and for claims made by others for any harm caused by me or my horse. I understand that I am entitled to wear protective equipment without penalty and I am encouraged to do so while understanding that no protective equipment can guard against all injuries.

I have read this entire agreement before signing below and I understand it, and further agree to abide by the rules of the Competition.

| NAME (Please Print) | ADDRESS | SIGNATURE |
|----------------------------|---------|-----------|
| Owner: | | |
| Phone: | | |
| Trainer: | | |
| Phone: | | |
| Coach: | | |
| Phone: | | |
| Academy Instructor: | | |
| Phone: | | |
| Rider #1: | | |
| Phone: | | |
| Rider #2: | | |
| Phone: | | |

I consent to the child's participation and agree to all of the above provisions and assume all of the obligations of the Release on the child's behalf.

Parent/Guardian Signature: (Required if Rider is a minor) _____

Print Parent/Guardian Name (Please Print): _____

Emergency Contact Name: _____ **Phone #** _____