Harvest View Stables Spring Schooling Show Entry Form

Sunday, August 4, 2019

$10/class; $30/division

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse (1st choice):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse (2nd choice):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse (3rd choice):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Class Number | Class Description | Fee |
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 Total Due:\_\_\_\_\_\_\_\_\_\_\_

 Total Paid:\_\_\_\_\_\_\_\_\_\_\_

 Check/Cash/Paypal/GooglePay

***AGREEMENT FOR RELEASE AND WAIVER OF LIABILITY***

I understand that horseback riding, handling and grooming of horses and participating in other stable and equestrian activities are extremely dangerous. I understand that all animals are unpredictable, and while Harvest View Stables exercises reasonable care in the selection, training and use of its horses and ponies, it is impossible to guarantee the behavior or actions of the horse, pony or other animal at any time, or in any situation.

I understand and acknowledge the risks and dangers of equestrian activities, which include in part, injury and/or damages to persons or property, serious bodily injury and death. I understand that this release is not limited to activities occurring on the property or premises of Harvest View Stables, but includes activities associated with Harvest View Stables at other locations, including but not limited to horse shows, trail rides, trailering, transportation of persons and animals and other activities or excursions associated with Harvest View Stables.

I agree to accept the risks and dangers associated with equestrian and stable activities, and I voluntarily and knowingly assume the risks of injury or death to myself and/or my child or family member as set forth in this release. I wish to participate or allow my child to participate in equestrian and stable activities with full knowledge of the dangers and risks of these activities.

I knowingly and voluntarily agree to release and hold harmless Harvest View Stables and Harvest View Stables’ partners, directors, owners, employees, agents and its respective heirs, successors and assigns (“Affiliated Parties”)against and from, any and all damages, claims, actions, liabilities, loss, costs and expenses (including, all reasonable attorneys' fees and expenses associated with litigation), incurred by or asserted against Harvest View Stables or Affiliated Parties arising out of activities associated with the use, care or other activities involving equine(s) or other animals, participation in any activities related to equines or other animals or other activities associated with Harvest View Stables or Affiliated Parties, and any alleged negligence of Harvest View Stables.

I have full authority to execute this release. If I am executing this Release on behalf of a minor, I certify that I am the legal parent or guardian of the child, and that I desire the child to participate in the full program of all activities.

The parent or guardian (if registrant is under 18) or registrant must sign this form in order for the registrant to be registered and permitted to engage in any activities associated with Harvest View Stables as set forth above.

I certify that I have read and I fully understand and agree to abide by the conditions and agreements as outlined above.

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| **Rider Name (please print):** | **Date:** |
| **Signature (parent or guardian if under 18):** | **Please print name (parent or guardian if under 18):** |
| **Address:** | **Home Phone:****Office Phone:****Cell Phone:** |
| **Email address** | **Emergency contact name/phone number:****(if other than above)** |