

LANCASTER EQUESTRIAN

SCHOOLING SHOW

SHOW DATE:

Back #	Name of Horse	USEF #	Color	Sex	Ht.	Age	Green Year		Horse/Pony			Entry Fees:	
							1st	2nd	Sm	Md	Lg	Classes:	\$
Name of Rider #1		Age	USEF #	Classes:								Schooling Fee: \$10 each	\$ 10.00
Name of Rider #2		Age	USEF #	Classes:									\$
Owner or Authorized Agent			Rider # 1			Trainer							\$
Owner's Name:			Rider Name:			Trainer Name:							\$
Address:			Address:			Address:							\$
Phone #:			Phone #:			Phone #:							\$
Owner USEF #:			Rider USEF #:			Trainer USEF #:							\$
Recipient of Prize Money Awards <input checked="" type="checkbox"/>			Name of Individual/Corporation:										\$
SSN or Tax ID: NOT REQUIRED		Address:										TOTAL FEES:	\$

YES, I would like to receive emails about future Lancaster Equestrian Shows. Email address: _____

Please make check payable to: Lancaster Equestrian

ALL ACTIVITY RELEASE AND WAIVER OF LIABILITY:

I HAVE READ THE WARNING THAT:

UNDER NJ LAW AN EQUINE EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES., PURSUANT TO PL,C.287C5:15-1 TO 5:15-12.

And further that:

Terrain, horses, and other hazards which can result in serious injury.

I accept the responsibility of protecting myself from injury by being careful around the natural dangers and around animals.

I represent that I have medical insurance and lost wage insurance which will adequately cover me in the event of injury.

I agree that I will not file any lawsuit seeking punitive damages.

I hereby irrevocably waive the right to trial by jury.

I hereby irrevocably certify that I have read and accept the above terms. In the event that I file a lawsuit in violation of the above terms I agree to be responsible for all legal fees of any entity or person which must defend said lawsuit.

Lancaster Equestrian and it's staff will not be held liable for any damages in connection with this horse show.

Rider (Mandatory)	Owner/Agent (Mandatory)	Trainer (Mandatory)	Coach (If applicable)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Is Rider a U.S. Citizen? YES NO			

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

Parent/guardian Print Name: _____

Emergency Contact Phone No.: _____