

PLEASE FILL OUT THIS FORM THOROUGHLY AND COMPLETELY - THANK YOU

Spy Coast Farm Young Horse Show Series – 2019 Chestertown, MD – July 20th

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|-------------------------------|
| Official Use Only Bridle # |
|-------------------------------|

| Name of Horse | | Original Breed Registry | Gender | Date of Birth (enclosed proof) | | |
|-----------------------------------|--------------|--|------------------|--|-----------------------------------|-----------------------------------|
| | | | | | | |
| Sire | | Second Sire (Dam's Sire) | Country of Birth | | Breeder | |
| | | | | | | |
| Horse Is For Sale? | Asking Price | Sales Contact Name | | Sales Contact Phone | Coggins Date (enclosed copy) | Health Cert. Date (enclosed copy) |
| | | | | | See BioSec Protocol on Prize List | |
| Division/Class Number | | Class Description | | | Fees | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| H/J Schooling rounds @\$20/round: | | Dressage Under Saddle TOC - SPECIFY TEST HERE: | | Hunter – Jumper – Dressage Circle discipline of choice above | | \$ |

| | | |
|---------------------------|---|-----------------------|
| Owner | Total Class Fees | \$ |
| Address | Stall fee – Week end Trailer In / Non stabling Fee (per horse) | \$ 100.00 \$ 50.00 |
| City/State/Zip | Grounds Fee (per horse) | \$ 40.00 |
| Best Contact Phone | Office Fee | \$ 40.00 |
| E-Mail Address | Office Fee – School Only | \$ 20.00 |
| TOTAL FEES | | \$ |

| | |
|---------------------------|---|
| Rider | Please make checks payable to: YOUNG HORSE SHOW and send entries to: 2901 Richmond Road – Suite #: 130-355 Lexington, KY 40509 ENTRY DEADLINE: 07/5/2019 – Late fee \$25 |
| Address | |
| City/State/Zip | |
| Best Contact Phone | |
| E-Mail Address | |

| | |
|---------------------------|--|
| Trainer | I have read and I agree to all the YHS and Spy Coast Farm rules & regulations and to all the rules posted in this show's prize list and entry form. X _____ Date: |
| Address | |
| City/State/Zip | |
| Best Contact Phone | |
| E-Mail Address | |

IMPORTANT: PLEASE READ

I AGREE in consideration for my participation in this Competition to the following:
 I AGREE that "Competition" as used herein includes, Sponsor, Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers.
 I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm").
 I AGREE to hold harmless and release the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Competition.
 I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition.
 I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Competition and to 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 while at the Competition. I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the competition strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior rider, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I represent that I have the requisite training, coaching and abilities to safely compete in this competition. © All rights reserved - 2018