

Mail to:  
 Amberlea Meadows  
 51031 Range Rd. 252  
 Leduc County, AB T9G 0B7  
 Attn: Show entries  
 Fax: 780-955-7755  
 E-mail:  
 showoffice@amberleameadows.com  
 WWW.AMBERLEAMEADOWS.COM



**AMBERLEA MEADOWS  
 2017 AMBERLEA MEADOWS SPRING WELCOME  
 HORSE SHOW  
 ENTRY FROM  
 ENTRIES CLOSE April 17, 2017  
 April 28 -30/ 2017  
 Please make cheques payable to:  
 Amberlea Meadows  
 Please fill out one form per horse**

For Office Use Only  
 Entry # \_\_\_\_\_

Media Release: Your signature on this page is consent for us to use photos of you and your horse, for show results and show promotional purposes only.  
 Circle: Yes No

Name of Rider		JR/ AM	EC# (Bronze Mandatory)		AEF	Jump Alberta	EMAIL Rider:		
Address		City, Province			Postal Code		Phone #		
Name of Horse		Age	Color / Sex		Pony Indicate size—circle one: SM MED LARGE		RV PARKING \$30.00 per Day ( ) Days		
Horse Owner Name:		Address		Telephone		Owner – EC #			
City, Province		Postal code			Make Prize Money cheque ( ) Owner Payable to: ( ) Rider				
Trainer		Stable With:			Bedding : Straw ( ) Shavings ( )				
Class Number	#	#	#	#	#	#	#	#	#
Class Entry Fees	\$	\$	\$	\$	\$	\$	\$	\$	\$

**This Document will affect your legal rights and liabilities, Please read Carefully:**

I acknowledge that the sport of horses is a risk sport and that I am participating at my own risk and in full knowledge of the hazards which are inherent in this sport. I further acknowledge the inherent risks in riding and working around horses, which risks include bodily injury to both horse and rider which can result from normal use, competition, or schooling, It is hereby also understood that no helmet or protective equipment can protect against all foreseeable injury. In consideration of being allowed to participate in this event, I hereby assume all risk and I hereby release and absolve Amberlea Stables Ltd., their directors, officers, employees, volunteers, and representatives, and their personal representatives, for all responsibility, liability or claims of any nature and kind which I may have arising from my participation in this activity, including but not limited to bodily injury or death to myself or my horse(s) and damage to property arising from any cause whatsoever, including the negligence of one or more of the individuals and organizations referred to herein.

"I hereby certify that every horse, rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the Constitution and rules of Equine Canada at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless EC, the competition, their officials, organizers, agents, employees and their representatives. The person responsible (PR) agrees to the release of any information on the entry form to EC."(A802.4) Must be signed by the person responsible

Any horse entered in any class at a competition may be selected for equine medication control testing while at the event location.(A602.6)

Signature of Owner/Agent \_\_\_\_\_ Date \_\_\_\_\_ 2017

Signature of Rider \_\_\_\_\_ Date \_\_\_\_\_ 2017

If rider is under eighteen(18) years of age, the parent/legal guardian MUST sign below.

I acknowledge as parent/legal guardian of \_\_\_\_\_ (here in after referred to as "the child") that I have read and fully understand and agree to the terms and conditions stated herein on behalf of my child and myself.

In the event that "the child" participates in an Equine Canada sanctioned competition where protective headgear is required for juniors, he/she will wear properly fitted and fastened approved headgear at all times while riding or driving at the event location. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions.

Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_ 2017

(A802.6) Must be signed by the parent/guardian.

Signature of Person Responsible \_\_\_\_\_ Date \_\_\_\_\_ 2017

Signature of person responsible (Article A1011: A person responsible for the care/custody, training and performance of the horse)

Entry will not be accepted without Parent or Legal Guardian Signature. The Person Responsible must be and EC member is good standing.

Total entry fees	
Admin. Fee & Medical Aid	\$50.00
Stabling \$90 per X of stalls____	
Stabling A Barn \$110 per X of stalls____	
Shavings #____ \$9 per bag	
Schooling Pass \$30	
RV\$30 parking	
Post Entry Fee \$50	
Subtotal	
GST5%	
Drug Test fee	3.50
JA Levy Fee	7.00
Equicup Levy	5.00
<b>Total</b>	

<p><b>Please photo copy and attach copies of your current 2017 Memberships. Proof of 2017 current memberships is now a prerequisite to competing at all EC rated shows and is now required to accompany all of your entry forms.</b></p> <p><b>PLEASE MAKE CHEQUES PAYABLE TO: AMBERLEA MEADOWS PAYMENT MUST BE RECEIVED WITH ENTRY TO ACCEPT ENTRY</b></p>	<p>If you wish to pay with credit card, please fill out the information below:          Card Number: _____          Expiry Date _____ CSV _____          Visa <input type="checkbox"/> MC <input type="checkbox"/>          Authorized Signature: _____          Name of Cardholder _____          Please print _____</p>
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