

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 JUMP WITH HOPE FOR KIDS WITH CANCER
HORSE SHOW ENTRY FROM
ENTRIES CLOSE July 17, 2017
July 27 – July 30, 2017
Please make cheques payable to: Amberlea Meadows
Please fill out one form per horse.**

For Office Use
Only

Entry #

Name of Rider		JR/ AM	Age if Junior	Jump Alberta Yes ()		EC#	AEF #		CET#
Address			City, Province		Postal Code		Phone #		
Horse—Name of Horse			Age	Color / Sex	Horse Recording/Passport #		Pony Indicate size—circle one: SM - MED—LARGE		
Horse Owner Name:		Address			Telephone		E-mail		
City, Province			Postal code			Make Prize Money cheque () Owner Payable to: () Rider			
Trainer		Trainer EC#		Stable With:			Bedding : Straw () Shavings ()		
Division/class Number	#	#	#	#	#	#	#	#	#
Division/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

EC Membership # _____

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

The Person Responsible must be and EC member in good standing..

Entry Fees	
Admin. Fee/ Paramedic Fee	55.00
Stabling \$205 per stall # of stalls ___ X	
Day Stall/Haul in Fee	
RV Hook Up \$150 (power/week)	
Nomination fee	
Shavings # ___ \$9 per bag	
Schooling Pass \$30.00	
Post Entry Fee 100.00	
GST 5%	
Jump Alberta Levy	10.00
Jump Canada \$20 Drug Test Fee \$7.00	20.00 7.00
Kids With Cancer Donation (optional)	5.00
Total Fees:	

<p>PLEASE MAKE CHEQUES PAYABLE TO: AMBERLEA MEADOWS PAYMENT MUST BE RECEIVED WITH ENTRY TO ACCEPT ENTRY</p>	<p>If you wish to pay with credit card, please fill out the information below: Card Number: _____ Type Visa <input type="checkbox"/> MC <input type="checkbox"/> _____ Expiry Date _____ CSV _____ Authorized Signature: _____ Name of Cardholder _____</p>
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