

2017 Creekside Stables Dressage Schooling Shows

Jun 17 closing date Jun 13

Aug 5 closing date Aug 1

Sept 9 closing date Sept 5

Please complete the following for each horse and rider combination.

Grounds fee applies once to each rider. Please include proof of negative Coggins.

Kindly include checks payable to: Creekside Stables

Mail entries to: Creekside Stables, 1031 Jessie Penrose Road, Blairsville, PA 15717

Exhibitor Name _____ Horse Name _____

Phone Number _____ Stable Name _____

Exhibitor Address _____ Exhibitor Status: Jr/YR (under 21 as of Jan 1st) Age _____
 _____ Adult Amateur Professional

Class Name (\$20 / test)				Qty	Amount
USDF Introductory	Test A _____	Test B _____	Test C _____	_____	_____
USEF Training Level	Test 1 _____	Test 2 _____	Test 3 _____	_____	_____
First Level	Test 1 _____	Test 2 _____	Test 3 _____	_____	_____
Second Level	Test 1 _____	Test 2 _____	Test 3 _____	_____	_____
Rider Test	Training _____	First Level _____	Second Level _____	_____	_____
Test of Choice	Level _____	Test _____		_____	_____
	_____	_____		_____	_____
USEA Beginner Novice	Test A _____	Test B _____		_____	_____
Novice	Test A _____	Test B _____		_____	_____
Training	Test A _____	Test B _____		_____	_____
Test of Choice	Level _____	Test _____		_____	_____
	_____	_____		_____	_____
USEF Western Dressage Test of Choice					
	Level _____	Test _____		_____	_____
	_____	_____		_____	_____

Show Management Only	
Exhibitor Num _____	Stall(s) _____
Check Num _____	Notes _____
Amount _____	_____
_____	_____

Grounds Fee	_____	25
Late Fee (\$30 after close)	_____	
Day Stall (\$30 / stall)	_____	
Overnight Stall (\$45 / stall)	_____	
TOTAL FEES	_____	

RELEASE OF LIABILITY, INDEMNITY, AND ASSUMPTION OF RISK AGREEMENT

In consideration of being permitted to ride/participate in the Creekside Stables Dressage Schooling Show ("The Show"), I agree for myself, my heirs, my executors, administrators and assigns:

1. I understand that participating in The Show involves risks and dangers of serious bodily injury, permanent disability, death, and/or property damage, which could result in severe social and economic losses and damages.
2. I accept and assume all such risks and dangers of bodily injury, permanent disability, death, and/or property damage, even if caused, in whole or in part, by the negligence of Creekside Stables, its owners, employees, agents, and all other persons associated with Creekside Stables and The Show.
3. I hereby release, waive, discharge and covenant not to sue Creekside Stables, its owners, employees, agents, and all other persons associated with Creekside Stables from any and all liability to me, my heirs, executors, administrators, and assigns, and for any and all claims, demands, losses or damages on account of any injury to me or my property or for my death when on the event grounds or while participating in the horse show, even if caused in whole by Creekside Stables and The Show.
4. I agree to indemnify Creekside Stables, its officers, employees, agents, and all other persons associated with Creekside Stables and The Show, from any and all loss, liability or expense, including attorney's fees, which may incur as a result of any claim of bodily injury, death or property damage occurring on the event grounds or resulting in participation in the horse show, even if caused in whole or in part by the negligence of Creekside Stables, its owners, employees, agents, and all other persons associated with Creekside Stables and The Show.
5. I have read and understand the above agreement, fully understanding its terms, have signed it freely and voluntarily without inducement, representation, assurance or guarantee being made to me, and I intend my signature to be a complete and unconditional release of all liability.

 PRINTED NAME OF HORSE SHOW PARTICIPANT

 SIGNATURES OF OTHER RIDERS (i.e. TRAINER, ETC)

 SIGNATURE OF HORSE SHOW PARTICIPANT OR PARENT/GUARDIAN OF HORSE SHOW PARTICIPANT (IF UNDER 18)

 DATE