

OWNER		RIDER		TRAINER		
Owner name	1 Name	HCBC#	Name			
Address	Address	Farm Name				
City/Prov/PC	Tel. ()	Address				
Tel. ()	Birth Date	City/Prov/PC				
Email	2 Name	HCBC#	Tel. ()	HCBC#		
HCBC#	Address	Email				
Prize Money Recipient		Tel. ()	Additional forms and prize list available st: jayandjoy@shaw.ca			
Name	Birth Date					
Address						
		Rider 1 Classes Entered	Entry Fees			
		Name of Horse		Rider 2 Classes Entered		
Tel. ()						
Horse Council of BC & Arbutus Meadows Release, Assumption of Risk, Waiver and Indemnification This document waives important legal rights. Read it carefully before signing. I have read the Rules and Regulations as printed in the Prize List for this Competition (including Arbutus Meadows Equestrian Centre Ltd. and Culverden Holdings Ltd.) and agree to all of its provisions. I AGREE to waive the right to the use of my photos & videos from the Competition. I AGREE in consideration for my participation in this Competition to the following: I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, 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 release HCBC and the Competition from all claims for money, damage or otherwise for any Harm to me or my horse and for any to others, even if the Harm resulted, directly or indirectly, from the negligence of HCBC or the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of HCBC or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) HCBC and 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 at the Competition. I have read HCBC rules about protective equipment and understand that I am entitled to wear protective equipment without penalty, and I acknowledge that HCBC strongly encourages me that I do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a Junior Exhibitor, I consent to the child's participation and that he/she will wear a properly fitted, ASTM or BSI approved helmet. It is understood that juniors not meeting this requirement will not be allowed to compete at this competition. I AGREE to assume all of the obligations of this Release on the child's behalf. I have read the Prize List for the Competition and agree to all of its provisions. I AGREE that HCBC and "Arbutus Meadows Equestrian Centre Ltd. and Culverden Holdings Ltd." as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. I HERBY certify that every horse, rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the rules of this competition. It is herby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I herby accept this risk and hold harmless HCBC, the competition, their officials, organizers, agents, employees and their representatives. By signing below, I AGREE to be bound by all applicable rules and all terms and provisions of this entry blank.						
Signatures Mandatory						
Owner/Agent Signature:		Rider 1/Handler Signature:		Trainer Signature:		
Print Name: _____		Print Name: _____		Print Name: _____		
				Parent/Guardian Signature:		
				Rider 2 Signature:		
				Print Name: _____		
				Print Name: _____		

Optional Nomination Fee \$40.00	
_____ Portable Stalls @ \$150	
_____ Indoor Stalls @ \$200	
On Separate CHQ Clean Stall Deposit \$50	
Hunter Schooling Fee \$40	
Jumper Schooling Fee \$40	
Late Entry Fee \$35 (after closing date)	
# _____ Bar-B-Q Dinner Tickets \$15	
Camper/Trailer/RV parking(no hook-ups)per night \$25	
(only applicable to those collecting points) VIHJA Fee \$15.00	
Exhibitor Fee \$40.00	\$40.00
Sub Total	
G.S.T. 5% of Sub Total	
TOTAL FEES ENCLOSED	

MasterCard VISA Cheque # _____ Amount _____

Cardholder Signature _____

Print Name _____

Credit Card # _____ Exp. _____

CVV # _____ Sign _____