

Parkland Spring Horse Show May 17 – 19, 2024

Westerner Exposition Center, Red Deer, AB

American Saddlebred, Morgan All Breed Entry I

MAIL ENTRY FORM & FEES TO:

Parkland Spring Horse Show, Marion Enders, PO Box 6216, Innisfail, AB T4G 1S9 EC - Bronze - #240163

PLEASE TYPE OR PRINT/ONLY <u>ONE HORSE</u> PER ENTRY FORM. All entries must be complete. Enclose copies of horse registration papers (both sides), purchase contract (if applicable). EC/USEF membership cards, Amateur certification; AHA Competition cards for each rider, handler, owner & correct fees.

For more than ONE horses being entered by same owner please copy additional entry forms and complete each in full with all signatures.

	Name of Horse		Reg. No		DOB	Sex	Color		
	Sire		Dam						
D: 1 / 1: # #		I Danasi M	Class #!s	 				01 5	
Rider/driver/handler		Breed#	Class #'s					Class Fee	
'Address:		ECF/USEF							
								\$	
Rider/driver/handler		Breed #	Class #'s					Class Fee	
		50541055							
Address:		ECF/USEF						\$	
** Acknowledgeme	ent(s) to the "Trainer" or "	Owner" will he sent	hv email**			Total (lass Fees	\$	
	•			y Form and agrees to				T	
Each person signing this entry form acknowledges that he/she has read the front & reverse of the Entry Form and agrees to the applicable terms, conditions, waivers, releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge. ALL Owners, Trainers, Riders, Drivers & Handlers						STABLING \$			
	MINOR entrants MUST also ha						rse Stall = \$150.00 ck Room = #135.00		
OWNER (as appears on registration papers or contract) MINORS MUST NOT SIGNMUST HAVE ADULT SIGNATURE						Office Fee \$40.00			
ame			Breed	Breed #			ee \$40.00	<u>\$</u>	
Address			EC/USEF#	USEF#			ee -\$5.00	<u>\$</u>	
City, Province			Phone _			Show F	Program \$5.00	\$	
Postal Code/Zip	email				_	Snama	ua hin	•	
RAINER shall be sigr	ned by the <u>trainer</u> or <u>person re</u>	esponsible for the care,	training, custody & per	formance of the horse		Sponso see prize	Iist for fee listing	\$	
Name			Breed	#	_	Late fee		\$	
ddress			EC/USEF#		_	After April per F	20, 2024 lorse entered		
Postal/zip		Phone	Coach # _		_				
***Amateur Owner Relationship to Horse Owner						TOTA	L FEES	\$	
		PLEASE complete this sta	atement						
****EMAIL ADDRESS: *** Please print LEGIBLY in dark ink - required – ***							Entries Close - April 20, 2024		
STABLE WITH -							-		
Use common stabl	ling name. Requests for "g	roup" stabling should	be sent in the same	envelope		*DEVED	SE SIDE OF		
						- ENTRY	FORM MUST		
Payment Informa	nent Information Check # Name on Check:					NO Minor signatures			
		Total Amo	ount on Cheque \$				pies of all me		
JEW. E TDA	NEED CODY ATTACK	UED		Amaunt - 5 5 T	fe		apers in owner	name	
EW: E-TRANSFER COPY ATTACHED EMAIL - E-transfer to: paha79670@gmail.com				Amount of E-Transfer		Cheque payable to: Parkland Spring Horse Show OR			
		J@gmail.com					d Arabian Hors		
NAME on E-trans	ster			5					

This document waives very important legal rights. Read it carefully before signing.

EQUESTRIAN CANADA NOTICE:

Signature of Parent/Guardian

"In the event an exhibitor participates in an Equestrian 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."

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 Equestrian 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)

"I hereby certify that every horse listed on this entry f General Regulations, Article A519, Vaccinations." EC"	orm has met the requirements of Article A519, Vaccina "The person responsible (PR) agrees to the	tions. See Rules of Equestrian Canada, Section A, ne release of any information on the entry form to								
Signature of Person Responsible:		_ Date								
Name of Person Responsible (please Print):	EC#:	(Section A, General – EC								
Regulations-Glossary: Person Responsible)										
The Person Responsible for a horse must be an adulas official responsibility for that horse under EC Rule of these Rules, the Person Responsible is normally guardian in the case of junior competitors. The Person responsible for any act performed in the stables by I ridden, driven or exercised. The Person Responsible a parent/guardian is entitled to sign as PR. In the case	all who has, or shares, responsibility for the care, trainities and is liable under the penalty provisions of the Rule the trainer, owner or the competitor who rides or driving Responsible is ultimately responsible for the condition himself or herself or by any other person with authoriz (PR) must be an EC Sport License holder in good stanse of USEF member entries PR may also be a USEF n	ng, custody and performance of the horse and who is for any violation of the EC Rules. For the purpose less the horse during an event, or a parent or legal in, fitness and management of the horse and is alone led access to the horse, or while the horse is being ding OR in the case of a junior/Minor owner entries, nember in good standing (see Article A213.2)								
BY SIGNING BELOW, I AGREE TO BE BOUND BY ALL APPLICABLE FEDERATION RULES AND ALL TERMS & PROVISIONS OF THIS ENTRY FORM *NOTE: Address is very important for all Riders, Drivers, Handlers that are not listed on the front of this entry form. Please complete in full**										
Rider/Driver/Handler (Mandatory)	Owner/Agent (Mandatory)	Trainer (<i>Mandatory</i>) <i>or</i> Custodian of horse at show								
Signature:	Signature:	Signature:								
Print Name & Address	**Print Name & Address**	Print Name & **Address**								
Rider/Driver/Handler (Mandatory)	If Rider/Driver/Handler is a MINOR (Mandatory)	Coach (If Applicable)								
Signature:	Parent/Guardian ADULT Signature:	Signature:								
Print Name & Address	**Print Parent/Guardian Name & Address** no membership required for this signature	Print Name & Address								
MINOR ENTRANT: NAME	DATE OF I	DATE OF BIRTH								
Address:	Telephone	Telephone								
MINOR ENTRANT: NAME	DATE OF I	DATE OF BIRTH								
Address:										
	rticipates in an Equine Canada sanctioned competition neadgear at all times while riding or driving at the event	where protective headgear is required for juniors, location. It is understood that juniors not meeting this								

Emergency Contact Number: ***