

Entries Close: APRIL 18, 2017

**HMI FRIENDSHIP SERIES 2**

**MAY 20 - 21, 2017**

TRAINER	ADDRESS	CITY/ST.	ZIP	Date of Birth: / /
HOME # ( )	BARN # ( )	FAX # ( )	BARN NAME	
USEF/USHJA#	Email			

OWNER	ADDRESS	CITY/ST.	ZIP	Date of Birth: / /
HOME # ( )	WORK # ( )	FAX # ( )		
USEF/USHJA#	Email			

RIDER	ADDRESS	CITY/ST.	ZIP	Date of Birth: / /
HOME # ( )	WORK # ( )	FAX # ( )		
USEF/USHJA#	Email			

HORSE	AGE	COLOR	SEX	HEIGHT	USEF/USHJA #
RIDER	CLASSES				
RIDER	CLASSES				

**USHJA OUTREACH COMPETITION**

<p><b>CREDIT CARD PAYMENT</b></p> <p>Download credit card form at <a href="http://www.headlandsmanagement.com">www.headlandsmanagement.com</a></p> <p><b>NO FAXED OR EMAILED ENTRIES</b></p>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;"><b>DEPOSIT FEES</b></td> <td style="width:30%;"></td> </tr> <tr> <td>1 Horse @ \$25</td> <td>Entry Fees</td> </tr> <tr> <td>Horse Stall @ \$300</td> <td>Stall Fees @ \$300</td> </tr> <tr> <td>Tack Stalls @ \$300</td> <td>Tack Rooms @ \$300</td> </tr> <tr> <td></td> <td>CA Drug Fees <span style="float: right;">\$5</span></td> </tr> <tr> <td></td> <td>Non-Stabling @ \$50/day</td> </tr> <tr> <td><b>TOTAL</b></td> <td>Per horse per day</td> </tr> <tr> <td></td> <td>Ambulance Fee @ \$30</td> </tr> <tr> <td></td> <td>Payment # ( )</td> </tr> </table> <p><b>RELEASE</b></p> <p style="text-align: center; font-size: 1.2em;"><b>SEE BACK</b></p>	<b>DEPOSIT FEES</b>		1 Horse @ \$25	Entry Fees	Horse Stall @ \$300	Stall Fees @ \$300	Tack Stalls @ \$300	Tack Rooms @ \$300		CA Drug Fees <span style="float: right;">\$5</span>		Non-Stabling @ \$50/day	<b>TOTAL</b>	Per horse per day		Ambulance Fee @ \$30		Payment # ( )
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**THIS DOCUMENT WAIVES AND RELEASES IMPORTANT LEGAL RIGHTS. PLEASE READ IT CAREFULLY BEFORE SIGNING.**

I understand and expressly acknowledge that I am fully aware that horseback riding and jumping, horse sports, and my participation in this Horse Show competition involve inherent dangerous risks that include, but are not limited to, the risks of accident, loss, serious bodily injury, property damage, and/or death ("Harm"). I hereby agree to expressly assume ALL RISK OF HARM to myself and my horse(s), and choose to voluntarily participate in this Horse Show.

I HEREBY EXPRESSLY, VOLUNTARILY, AND UNCONDITIONALLY RELEASE, INDEMNIFY AND HOLD HARMLESS Howard Herman, Marcia Herman, Meredith Herman, Ashley Herman, Burgundy Farms, Riverside Equestrian Center, Sonoma Horse Park, Sally Hudson and/or Headlands Management, Inc., their owners, officers, members, agents, employees, licensees and invitees, as well as any other person, firm, corporation, company, entity, or anyone in any way connected with the ownership and management of the show premises and the Horse Show, or in control of the premises or equipment related thereto (collectively, "Releasees") from and against ANY AND ALL CLAIMS FOR INJURIES, DAMAGES, AND/OR LOSSES connected with participation in this Horse Show. This includes, but is not limited to, claims for monetary damages, attorney's fees, costs, losses, and/or causes of action against Releasees for any and all Harm to me or my horse(s) and for any Harm caused or contributed in any way to by me or my horse(s) to others, arising out of or in any way connected with participation in this Horse Show, and includes reimbursement of Releasees' costs and attorney's fees incurred in defense of such claims. I further agree to this release, indemnification, and holding harmless WHETHER OR NOT SUCH CLAIM, INJURY, DAMAGE, OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM MY NEGLIGENT ACTS OR OMISSIONS OR THE NEGLIGENT ACTS OR OMISSIONS OF RELEASEES, to the fullest extent allowed by law. I also acknowledge that no representations or warranties, whether oral or written, implied or expressed, have been made by Releasees concerning the Horse Show premises, the Horse Show event, or the activities at Burgundy Farms, Riverside Equestrian Center, and/or Sonoma Horse Park, or any other matter.

I understand and agree that this Release, Assumption of Risk, Waiver and Indemnification shall be binding upon my heirs and assigns. If a parent or guardian is signing below, he or she consents to the minor child's participation in the Horse Show and agrees to all of the above provisions and agrees to assume all of the obligations of this release of liability on the minor child's behalf.

I HEREBY DECLARE THAT I CAREFULLY HAVE READ THE FOREGOING RELEASE OF ALL LIABILITY, I AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING BELOW, AND I AGREE TO THE TERMS OF THE RELEASE IN FULL.

RIDER OR PARENT/GUARDIAN (IF RIDER IS UNDER 18 YEARS OF AGE):

**OWNER/AGENT**

**RIDER/HANDLER**

**TRAINER**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

**PARENT/GUARDIAN**

**RIDER/HANDLER**

**COACH**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name