## FOSHAY INTERNATIONAL JUMPER CLASSIC

SEPTEME	3ER 1-2, 2019						
Rider:		DOB (M/D/Y):		Address:		Postal Code:	
Phone:	Email:			Address: EC	#:	NBEA #:	
Horse:		Sex:	Height:	Colour:	_ Horse's DOB	(M/D/Y):	
Owner:		_ Address:		Email:		Phone:	
EC #:	NBEA #:	-					
Coach: _	Pho	ne:		EC #:			
Class #	Gold Jumper Division	Entry Fee	Class #	Bronze Jumper Division	Entry Fee	Total Fees	
9	0.80m Jumper Welcome		3	0.60m Jumper Welcome		Bronze Entry Fees	
10	0.80m Jumper Speed		4	0.60m Jumper Speed		Gold Entry Fees	
13	0.90m Jumper Welcome		5	0.70m Jumper Welcome		Administration Fee (\$50.00)	
15	0.90m Jumper Speed		6	0.70m Jumper Speed		Late Entry Fee (\$35.00)	
17	1.0m Jumper Welcome		7	0.75m Jumper Welcome		Stabling (\$50.00)	
19	1.0m Jumper Speed		8	0.75m Jumper Speed		Shavings: \$xbags	
21	1.10m Jumper Welcome		11	0.85m Jumper Welcome		Hay: \$7.00 x	
23	1.10m Jumper Speed		12	0.85m Jumper Speed		Medical on-site fee (\$5.00)	
26	1.15m Jumper Welcome		14	0.90m Jumper Welcome		SUBTOTAL	
28	1.15 Jumper Speed		16	0.90m Jumper Speed		HST (15%)	
30	1.20m Jumper Welcome		18	1.0m Jumper Welcome		SUBTOTAL	
32	1.20m Jumper Speed		20	1.0m Jumper Speed		Bronze Drug Fee (\$3.50)	
34	1.25m Jumper Welcome		22	1.10m Jumper Welcome		Gold Drug Fee (\$7.00)	
1	1.25m Jumper Speed		24	1.10m Jumper Speed		Gold Jump Levy (\$20)	
2	1.25m Grand Prix		25	1.10m Mini Prix		SUBTOTAL	
			27	1.15m Jumper Welcome		Credit Card Fee (5% of total)	

1.15 Jumper Speed

1.20m Jumper Welcome

1.20m Jumper Speed

29

31 33

Credit Card: Visa or Mastercard

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

**Cheques:** payable to Foshay South Eventing Inc. **Please include:** proof of vaccination, negative coggins (within 12 months), copies of NBEA and EC membership, and payment.

TOTAL FEES PAID

The Person Responsible must sign below the waiver. The person responsible is the individual responsible and accountable for the care, training, custody and performance of the horse. The person responsible may be an owner, rider, or coach and must hold a senior EC Sport license. When the competitor is 18 yrs or under, the Person Responsible may be a parent/guardian and are not required to have an EC Registered Participant status. The person responsible must be present during the competition. (A1011)

## LIABILITY WAIVER - Foshay International Jumper Classic

I hereby certify that every horse and rider 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 the 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 acknowledge that the Equestrian Sport and its competitions are a high risk sport and that I am participating at my own risk and in full knowledge of the hazards and potential hazards which are inherent in this sport. I further acknowledge that inherent risks in riding and working around horses, which include bodily injury to both horse and rider which can result from normal use, competition or schooling.

In consideration of being allowed to participate in this event, I hereby assume all risk and I hereby release and absolve the Organizing Committee, Foshay South Eventing Inc., National, Provincial, and Discipline Affiliates, Equestrian Canada, the New Brunswick Equestrian Association and their Officials, Dressage New Brunswick, Volunteers, Officials, Directors, Agents, Representatives and Employees and the Owners and Occupiers of the land upon which the competition is held, from all responsibility, liability or claims of any nature and kind which I may have arising from the 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 whatever, including the negligence of one or more of the individuals and organizations referred to herein.

Person Responsible (please print):    Phone Number:	
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Equestrian Canada #: \_\_\_\_\_\_ Signature of Person Responsible: \_\_\_\_\_\_

## All riders, regardless of age or level or competition, must wear properly fitted safety approved protective headgear at all times when mounted at any EC sanctioned Dressage competition at the event location.

I hereby declare that in making this entry that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

Signature of Rider:	 D	ate:
0		

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

If rider is under eighteen years, the Parent/Guardian must also sign below

"In the event that \_\_\_\_\_\_ 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." (A802.6)

I acknowledge as Parent/Guardian of	_ that I have read and fully understand and agree to the terms and conditions
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stated herein on behalf of \_\_\_\_\_\_, and myself.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_