MAFFITT · LAKE
EQUESTRIAN · CENTER
LLC.

Make Checks Payable to :
Maffitt Lake Equestrian Center, LLC (MLEC)
MAIL TO:
3297 105th Street Cumming, Iowa 50061
PHONE: 515-981-1699 FAX: 515-981-1698

FANTASY SCHOOLING SHOW FINALE
Hunter/Jumper Entry Form
September 23-24, 2017

Name of Horse	SEX	COLOR	HEIGHT	AGE

Classes Entered	Name of Rider	Age	INHJA Member
			Y or N

Please stable with: (Trainer's Name)
_____

Circle One:

AMEX VISA DISC MC 3% Charge for CC's

CVC# EXP. Month/Year

_____
Cardholder's Name as it Appears on Card

_____
Signature

_____
Street/P.O. Box City/State/Zip

OWNER
Signature:_____
Print Name:_____
Street:_____
City:_____
State:_____Zip Code:_____
Telephone: ( )_____
E-Mail:_____

TRAINER
Signature:_____
Print Name:_____
Street:_____
City:_____
State:_____Zip Code:_____
Telephone: ( )_____
E-Mail:_____

RIDER #1
Signature:_____
Print Name:_____
Street:_____
City:_____
State:_____Zip Code:_____
Telephone: ( )_____
E-Mail:_____

PARENT
Signature:_____
Print Name:_____
Street:_____
City:_____
State:_____Zip Code:_____
Telephone: ( )_____
E-Mail:_____

#_____Stall Fee @ $35 per DAY or $90 (Fri-Sun)	_____
#_____Bedding @ $8.50	_____
#_____Office Fee @ $10	_____
#_____Weekend Paddock Fee @ $75	_____
#_____Non Showing Horse Fee $20	_____
#_____Grounds Fee for Non Stabled Horse @ $15	_____
#_____Sponsorship Camper Parking @ $40 per night	_____
#_____Late Fee *(Entries not in by Friday) @ $10*	_____
#_____Fantasy Shows Year End Membership Fee @$15 *(Membership is a one time fee)*	_____

Federation release, assumption of risk, Waiver, and indemnification
This document waives important legal rights. read it carefully before signing.

I AGREE in consideration for my participation in this Competition to the following:
I AGREE that the "Competition" as used herein includes the Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, and volunteers.
I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, 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 hold harmless and release the Competition from all claims for money damages or otherwise for any Harm to me or my horseand for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of theFederation or the Competition.
I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims forHarm to me or my horse, and for claims made by others for any Harm caused by me or my horse while at the Competition. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf I represent that I have the requisite training, coaching and abilities to safely compete in this competition.
BY SIGNING ABOVE, I AGREE to be bound by all terms and provisions of this entry blank and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand. BOD Effective 12/1/13