

## 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 VI Hunter/Jumper Entry Form August 25, 2019

Name of Horse		SEX	COLOR	HEIGH	HT AGE	Please stable with: (Trainer's Name)		
	Classes Entered		Name of Rider		Age	INHJA Member Y or N	Circle One:  AMEX VISA DISC MC	3% Charge for CC's
OWNER	Signature:	TRAINER	Street: City: State: Telephone	e: ( )	Zip C	ode:	Cardholder's Name as it Appears on Card	Month/Year
RIDER #1	Signature:	PARENT	Print Name Street: City: State:	e:	Zip Co	ode:	#Stall Fee @ \$35 per DAY or \$90 (Fri-Sun) #Bedding @ \$9.00 #Office Fee @ \$10 #Weekend Paddock Fee @ \$75	

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 nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negli-

gence 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 for Harm 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