



Make Checks Payable to :  
Maffitt Lake Equestrian Center, LLC (MLEC)  
MAIL TO:  
3297 105th Street Cumming, Iowa 50061

# 2025 FANTASY SCHOOLING SHOW

## Hunter/Jumper Entry Form

### Saturday/Sunday (circle one or both)

Name of Horse	SEX	COLOR	HEIGHT	AGE

Classes Entered	Name of Rider	Age	INHJA Member
			Y or N

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: \_\_\_\_\_

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

# Stall Fee \$45 per DAY or \$100 (Fri-Sun)  
# Bedding \$12.00  
# Medic Fee \$15  
# Weekend Paddock Fee \$100  
# Non Showing Horse Fee \$35  
# Grounds Fee for Non Stabled Horse \$25  
# Sponsorship Camper Parking \$50 per night  
# Late Fee (Entries not in by Friday) \$10  
# Fantasy Shows Year End Membership Fee \$25

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 horse and 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 the Federation 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 12/1/23