

Amberlea Meadows Harvest Horse Show
Presented by Amberlea Meadows
Wildrose Tournament

SCAN TO: showoffice@amberleameadows.com
 MAIL TO: Amberlea Meadows
 6645-156 St.SW. Edmonton, AB T6Y 0C1

fill in all required information – Incomplete entries will not be accepted

HORSE INFORMATION (As listed on official papers)

Horse's Registered Name:	Age (Birth Year):	Gender:	Colour:	Height:	Pony: <input type="checkbox"/> Large <input type="checkbox"/> Medium <input type="checkbox"/> Small
Trainer Name:	Trainer Phone:	Trainer Email:	Stable Name:		

RIDER INFORMATION

Full Name:	AEF#	DOB (MM/DD/YYYY):	<input type="checkbox"/> Junior <input type="checkbox"/> Amateur	Street Address:
City:	Province/State:	PC:	Email:	Contact Phone:

OWNER INFORMATION (As listed on official papers)

Full Name:	Prize Money Payable to: <input type="checkbox"/> Rider <input type="checkbox"/> Owner	Street Address:
City:	Province/State:	Contact phone:

STABLING

Stabling Fee: # of stalls _____ X \$175	Day Stall Fee: # of stalls _____ X \$65	Haul-In Fee # of days _____ X \$50.00 OR \$120 FOR SHOW	Shavings: # of bags _____ X \$9.00	TOTAL Stabling: \$ _____
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ENTRIES (Please Refer to Prize List)

Division / Class Numbers															TOTAL Entries: \$ _____
Division / Class Entry Fees:															

Hunter Schooling Pass \$30.00	
Admin & Medic Fee	\$75.00
Stabling # of Stalls _____ X 175	
Total Stabling	
Total Entries	
RV Hook \$140 Week	
Late Entry Fee \$50.00	
Haul in Fee # X 50	
Sub-total	
GST @ 5%	
TOTAL	

This Document will affect your legal rights and

Liabilities, Please Read Carefully 1. I am aware that the sport of horses, participating in the horse show, and being around horses involves many risks, dangers and hazards and I am participating in the Horse Show at my own risk and in full knowledge of the risks, dangers and hazards. I further acknowledge the risks, dangers and hazards in riding and working around horses, which risks, dangers and hazards include, but are not limited to, bodily injury to individuals who are around horses; and to both horse and rider which can result from normal use, competition, or schooling. It is hereby also understood that no helmet or protective equipment can protect against all foreseeable injury. 2. 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 Equine Canada and the AM Harvest Horse Show Prize List. 3. I certify that I am fully capable of participating in competition, schooling and normal use of a horse. I assume and accept full responsibility for bodily injury, death, or loss of personal property and expenses as a result of those inherent risks, dangers and hazards identified herein, and those inherent risks, dangers and hazards not specifically identified herein. 4. In consideration of being allowed to participate in this event, I hereby irrevocably release and forever discharge Amberlea Meadows Equestrian Center., their owners, employees, directors, shareholders, agents, representatives, volunteers, and sub-contractors, specifically from all liability, claims, demands, damages, actions or causes of action arising or as might arise, present or future, whether known or unknown and whether in law or equity, in connection with or arising from my participation in the AM Harvest Horse Show, including but not limited to bodily injury to myself or my horse(s) and damage to property arising from any cause whatsoever, including, but not limited to, the negligence of one or more of the individuals or organizations referred to herein. 5. I hereby declare that in signing this document, 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, administrators and assigns. 6. All persons mounted on a horse are required to wear ASTM or BSI approved helmets.

Signature of Rider _____ Date _____ If rider is under eighteen (18) years of age, the parent/legal guardian MUST sign below. I acknowledge as parent/legal guardian of _____ have read and fully

understand and agree to the terms and conditions stated herein on behalf of my child and myself. In the event that _____ participated in an Equine Canada sanctioned competition where approved headgear is required for juniors, he/she will wear a properly fitted,

ASTM or BSI approved helmet at all times while riding. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions. Parent/Legal Guardian _____ Date _____

Entry will not be accepted without signatures. Signature of Person Responsible _____ Date _____ EC #: _____ (Article A1011: Person responsible for the care/custody training and performance of the horse)

Entries Close Sept. 13/21 If paying by credit card please complete the following: Card # _____ Expiry Date: ____/____/____ Security Code: _____ Name on Card: _____

Media Release: Your signature on this page is consent for us to use photos of you and your horse, for show results and show promotional purposes only. Circle: Yes No

I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Amberlea Stables Ltd. and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand the risk of becoming exposed to or infected by COVID-19 at Amberlea Stables Ltd. may result from the actions, omissions, or negligence of myself and others, including, but not limited to Amberlea Stables employees, volunteers, and participants and their families.

Initial

Provide Proof of documentation for this horse
 (Has been vaccinated against Equine Influenza
 EHV1 & EHV 4 within the last 6 months)

Initial