

# August 28, 2011 / MASSACHUSETTS HUNTER JUMPER FINALS ONE ENTRY FORM PER Rider

**Mail Entries to Charlene Brown 22 SouthMayd St. Newport, RI 02840 / Tel 401 849 2696**  
**All Entries & payment for the MHJ Finals Must be Separate from Summer Showcase Horse Show**

<small>OWNER</small>	<small>HORSE</small>
Owner _____	Horse's Name _____
Address _____	Color _____
City _____ State _____ Zip _____	Age _____ Pony <input type="checkbox"/> sm <input type="checkbox"/> med <input type="checkbox"/> lg
Phone _____ E-mail _____	Sex _____ Horse <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Size _____

<small>TRAINER</small>	<small>RIDER 1</small>
Trainer Name _____	Riders _____ DOB _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ E-mail _____	Phone _____
	E-mail _____

*The Lobster Bake with live entertainment*  
*Saturday evening is free to all 2011 MHJ qualified exhibitor*  
*sponsored by Elite shaving*  
*Entries of those who have qualified, must be received by August*  
*16, 2011 to have your name entered into the Showcase MHJ*  
*program book. Entries and payment must be separate*  
*from Summer Showcase Entry forms*

Rider 1 Classes \_\_\_\_\_

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**ONE ENTRY FORM PER RIDER**

**THIS DOCUMENT WAIVES IMPORTANT LEGAL RIGHTS, READ IT CAREFULLY BEFORE SIGNING**  
 By Signing Below, Fieldstone Equestrian & Show Facility LLC. Entry Agreement: I have read the Entry Agreement as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Fieldstone Equestrian & Show Facility LLC 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 [insert name] to the following: 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 release the Fieldstone Equestrian & Show Facility Inc from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the Fieldstone Equestrian & Show Facility Inc or the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Fieldstone Equestrian & Show Facility Inc or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Fieldstone Equestrian & Show Facility LLC 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 at the Competition. I have read the Rules about protective equipment, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Fieldstone Equestrian & Show Facility Inc strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. 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 AGREE that the Fieldstone Equestrian & Show Facility Inc and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. I represent that I have the requisite training, coaching and abilities to safely compete in this competition. I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment to the Fieldstone Equestrian & Show Facility Inc accident/injury report form.

READ IT CAREFULLY BEFORE SIGNING\*\*\* EMERGENCY CONTACT # \_\_\_\_\_

Owner Signature \_\_\_\_\_ Trainer Signature \_\_\_\_\_

Print \_\_\_\_\_ Print \_\_\_\_\_  
 Rider 1 Signature \_\_\_\_\_ Rider 1 Parents Signature \_\_\_\_\_

Print \_\_\_\_\_ Print \_\_\_\_\_  
 Rider 2 Signature \_\_\_\_\_ Rider 2 Parents Signature \_\_\_\_\_

Print \_\_\_\_\_ Print \_\_\_\_\_

No Office Fee	
Entry Fees	\$200
Reserve me a <small>circle one</small>	
lobster / Steak	
Additional Lobster Bake	
Tickets @ \$25 each	
Lobster # _____	\$ _____
Steak # _____	\$ _____
Subtotal	_____
Total from Above	_____
Post entry fee	
after August 21	
\$35	
Other	_____
Total	_____
Amount paid in Cash \$	_____
Amount paid in Check \$	_____
Check #	