

Randolph College SWVHJA Fall Festival Show - October 20 & 21, 2018

EXHIBITOR NUMBER _____

NAME OF HORSE	PONY	<i>Circle each class you want to enter</i>			
	S/M	Unjudged Warm Up	1	Unjudged Warm Up	16
	L	Pony Equitation	2,3,4	SWVHJA Jr EQ. Flat (14 and under)	17
SWVHJA #		Limit Equitation	5,6,7	SWVHJA Jr EQ. Flat (15-17)	18
HORSE OWNER		Open Equitation (2'6")	8,9,10	SWVHJA Adult Flat	19
		Open Equitation (3'0")	11,12,13	SWVHJA Pony Medal	20
		Oak Ridge Last Chance Qualifier	14	SWVHJA Hunter Seat Medal	21
NAME OF RIDER	AGE-JR	Hunter Derby	15	SWVHJA Adult Medal (18-25)	22
				SWVHJA Adult Medal (26 & over)	23
SWVHJA #				Randolph College Medal Finals	24
NAME OF RIDER	AGE-JR			Oak Ridge Medal	(\$50) OR
SWVHJA #					
TRAINER					

Randolph College Activity Release Waiver, Assumption of Risks and Indemnification Agreement

In consideration of my/my daughter's/son's participation in any equine activities at Randolph College (the "College"), I hereby release and waive any rights to sue the College, its employees, agents and representatives for any loss, damage, injury or death to person or property sustained by me/my daughter/son in equine activities by any cause whatsoever, including but not limited to any risk inherent in an equine activity, such as (i) the propensity of an equine to behave in dangerous ways which may result in injury or death to a participant or bystander, or damage to property; or (ii) the inability to predict an equine's reaction to sound, movements, objects, persons, or animals; (iii) hazards of surface or subsurface conditions, whether known or unknown; (iv) the experience level of any participant; (v) a known or unknown health condition of any participant; and (vi) the condition and age of the equipment or tack. I assume all of the foregoing risks and any other risks inherent in equine activities and accept complete responsibility for making any and all examinations or inspection relating to those risks and any other potential risks of recreational activities, and I agree and understand that Randolph College shall have no responsibility whatsoever to make any such examination or inspection. I further assume all risk of, and agree to hold harmless the College, its employees, representatives and agents from and against, any and all loss, damage, injury or death to person or property, by whatever cause, including any act or omission, negligent or otherwise, on the part of the College, its employees, representatives or agents, or on the part of any other person.

If I am(my daughter/son is) a participant in College sponsored classes and/or programs, then I agree and understand that this Agreement shall apply to all equine activities in which I am (my daughter/son is) involved during the next twelve months from the dated below.

I hereby certify that the forgoing statements and representations are being made by me knowingly, freely and voluntarily, and I understand that the College is expressly relying upon the foregoing statements and representations in permitting my/my daughter's/son's participation in any equine activities.

SHOW FEES	
Classes Entered	
_____ @ \$18 each	
_____ @ \$25 each	
_____ @ \$50 each	
Stall Fee	
_____ @ \$35 each	
TOTAL AMOUNT DUE	
CASH RECEIVED	
CHECK RECEIVED	
Ck # _____	Balance
MAKE CHECKS PAYABLE TO:	
Randolph College Riding	
Pre Entries are Welcome	
Randolph College Riding Center 4762 Hawkins Mill Rd. Lynchburg, VA 24501	

Owner Signature _____	Rider Signature _____	Trainer Signature _____
Name of Owner (print) _____	Name of Rider (print) _____	Name of Trainer (print) _____
Address: _____	Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____	City, State, Zip: _____
Phone Number: _____	Phone Number: _____	Phone Number: _____

