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| | OFFICE USE ONLY |
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SWVHJA Annual Horse Show & Medal Finals

November 15—18, 2018

MAIL entries to:

(Must be Postmarked by November 7, 2018, to avoid late fee):
Julie Rosenberger, 105 Maywood St.,
Blacksburg, VA 24060

ALL entries must include an OPEN check for the entries made payable to "SWVHJA".

PLEASE DO NOT MAIL ENTRIES THAT REQUIRE SIGNATURES FOR DELIVERY.

****Please do not pre-pay entries.****

Please do not MAIL entries after Nov. 9, 2018

| | | | | |
|------------------------------|-----------|-------------------|-----------|-------------------|
| HORSE/PONY NAME S M L | RIDER # 1 | JR AM AGE: | RIDER # 2 | JR AM AGE: |
|------------------------------|-----------|-------------------|-----------|-------------------|

| DIVISION ENTRIES (Put #1 for Regular Rider and #2 for Alternate Rider) | | | | | | | | | |
|--|---------------|-----------------|----------------|-----------------|----------------|---------------|----------------------|---------------|---------------|
| YOUNGER ADULTS | OLDER ADULTS | CHILD HUNTER | GREEN HUNTER | INTERMED HUNTER | LOW HUNTER | SM/MED PONY | LARGE PONY | SPECIAL CHILD | SPECIAL ADULT |
| | | | | | | | | | Y O |
| WORKING HUNTER | PLEASURE PONY | JUNIOR PLEASURE | ADULT PLEASURE | PLEASURE HUNTER | HOPEFUL HUNTER | SCHOOL HUNTER | JC/TIP SP. TB HUNTER | PRE-BEG EQUIT | BEGIN EQUIT |
| | | | | | | | | | |

| RIDER #1 - INDIVIDUAL CLASS NUMBERS FOR CLASSICS, JUMPERS & EQUITATION | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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| | | | | | | | | | | | | | | | | | | | |
| RIDER #2 - INDIVIDUAL CLASS NUMBERS FOR CLASSICS, JUMPERS & EQUITATION | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td> </tr> </table> | | | | | | | | | | | | | | | | | | | |
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In order to pick up numbers a COPY of a valid Coggins MUST be left in the horse show office.

***** REMEMBER — You can enter online at: www.horshowsonline.com*****

In consideration of my/my child's participation in any equine activities at the SWVHJA Horse Show at the Virginia Horse Center, I hereby release and waive my rights to sue the SWVHJA Horse Show, the Virginia Horse Center, its manager, employees, agents and representatives for any loss, damage, injury or death to person or property sustained by me/my child in equine activities by any cause whatsoever including risks inherent in any equine activity such as, but not limited to 1) the propensity of any equine to behave in dangerous ways which may result in injury or death to a participant or bystander, or damage to property; 2) the inability to predict an equine's reaction to sound, movement, objects, persons or animals; 3) hazards of surface or subsurface conditions, whether known or unknown; 4) the experience level of any participant; 5) a known or unknown health condition of any participant; and 6) the condition and age of the equipment or tack. I assume all the foregoing risks and any other risks inherent in equine activities and accept complete responsibility for making any and all examinations or inspections relating to those risks and any other potential risks of recreational activities, and I agree and understand that the SWVHJA Horse Show and the Virginia Horse Center shall have no responsibility whatsoever to make any such examinations or inspections. I further assume all risk of, and agree to hold harmless the SWVHJA Horse Show, the Virginia Horse Center, its manager, employees, representative 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 SWVHJA Horse Show, the Virginia Horse Center, its manager, employees, representatives and agents, or on the part of any other person. I hereby certify that the foregoing statements and representations are being made by me knowingly, freely and voluntarily, and I understand that the SWVHJA Horse Show and the Virginia Horse Center are expressly relying upon the foregoing statements and representations in permitting me/my child's participating in any equine activities.

Parent/Guardian Signature (Required if Rider is a minor) _____ Emergency Contact # _____

Print Parent/Guardian Name: _____

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|--|-------------|
| RESERVE _____ FULL WEEK STALL @ \$125/stall | |
| Day of Arrival noon W TH F S | |
| Day of Departure TH F S S | |
| RESERVE _____ TWO DAY STALLS @ \$80/stall | |
| Day of Arrival noon W TH F S 2 day stalls are available at 3 PM | |
| Day of Departure TH F S S | |
| Late Fee (postmarked AFTER NOV 7, 2018 @ \$20 | |
| Office Fee \$10/horse | \$10 |
| Ground Fee \$20/day | |
| Non-showing horse @ \$25 | |
| OFFICE USE: | |
| Paid \$ _____ Ck # _____ | |
| STABLE WITH (Please use Trainer's/Friend's LAST NAME): | |

| | | | |
|--|--|--|---|
| Owner (ALL INFO MANDATORY) | Rider #1 (ALL INFO MANDATORY) | Rider #2 | Trainer (ALL INFO MANDATORY) |
| Print Name: _____ | Print Name: _____ | Print Name: _____ | Print Name: _____ |
| Address: _____ | Address: _____ | Address: _____ | Address: _____ |
| Phone () _____ | Phone () _____ | Phone () _____ | Emergency Contact # () _____ |
| E-mail: _____ | E-mail: _____ | E-mail: _____ | E-mail address: _____ |
| Signature (must be 18, or Parent/Guardian/Trainer must sign) : _____ | Signature (must be 18, or Parent/Guardian/Trainer must sign) : _____ | Signature (must be 18, or Parent/Guardian/Trainer must sign) : _____ | Signature (Parent/Guardian/Trainer must sign) : _____ |