



C-Horse Hunter Show – Saturday, September 10th, 2016

Entries due by September 5th

Rider's Name: _____
 Address: _____ City: _____
 Postal Code: _____ Phone Number(s): _____
 E-mail: _____ Horse Name: _____
 Name of Stable: _____ Trainer's Name: _____

Please circle classes entered:

<p>9:00am Start</p> <ol style="list-style-type: none"> 1) X-Rail Hunter 2) X-Rail Handy Hunter 3) X-Rail Equitation Over Fences 4) 2' Hunter 5) 2' Handy Hunter 6) 2' Equitation Over Fences 7) X-Rail Adult Hunter 8) X-Rail Adult Hunter 9) 2'3 Adult Hunter 10) 2'3 Adult Handy Hunter 11) Adult Equitation Under Saddle 12) Adult Hunter Under Saddle 	<ol style="list-style-type: none"> 13) Novice Horse Under Saddle 14) Novice Rider Under Saddle 15) 2'3 Hunter 16) 2'3 Handy Hunter 17) 2'3 Equitation Over Fences 18) 2'6 Hunter 19) 2'6 Handy Hunter 20) 2'6 Equitation Over Fences 21) Junior Rider Under Saddle 22) 2'6 Equitation Challenge 23) 2'9 Hunter 24) 2'9 Handy Hunter 25) 2'9 Equitation Over Fence
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For more information on the Equi-Cup Series Please visit: www.equicup.com

Number of Classes _____ X \$25.00	\$ _____	
Paramedic Fee	\$ <u>25</u>	
Administration Fee	\$ <u>30</u>	(includes Equi-Cup Fee)
Day stall (limited) X \$40	\$ _____	
Late Fee - \$20	\$ _____	
G.S.T. @ 5%	\$ _____	
TOTAL:	\$ _____	

Please make cheques payable to C-Horse Equestrian Center Ltd.

Entries can be mailed to: C-Horse Equestrian Center
 Box 37, DeWinton, AB T0L 0X0

Or e-mailed to: chorse26@gmail.com

Please contact Rita Condon if you have any questions: 403-620-2277

I hereby certify that neither C-Horse Equestrian, nor the organizing committee, or owners of C-Horse Equestrian, nor any of their staff or agents shall be in any way liable for any accident, injury, damage, loss, or any other matter that may happen from any cause or circumstance whatsoever, to exhibitors, competitors, or members or their agents or to anyone on the tournament grounds or for any other loss, claim, matter, circumstance or event in connection with or arising out of, or attributable to their tournament or any journey to or from the tournament. It is to be understood and agreed upon that you indemnify and save C-Horse Equestrian, its owners, agents and employees from and against any and all liability arising out of such loss, damages, claims or costs.

Date: _____ Rider Name: _____

Rider Signature: _____

Parent/ Guardian Name: _____

Signature of Parent/ Guardian (if under 18 years old): _____



C-Horse Jumper Show – Sunday, September 11th, 2016

Entries due by June 5th

Rider's Name: _____

Address: _____ City: _____

Postal Code: _____ Phone Number(s): _____

E-mail: _____ Horse Name: _____

Name of Stable: _____ Trainer's Name: _____

Please circle classes entered:

JUMPER 1 – Sand	JUMPER 2 – Grass
<p>9:00am Start</p> <p>1) 0.5m Training Jumper 2) 0.5m Training Jumper</p> <p>3) 0.65m Training Jumper 4) 0.65m Training Jumper</p> <p>5) 0.75m Schooling Jumper 6) 0.75m Jumper Stake</p> <p>7) 0.85m Schooling Jumper 8) 0.85m Jumper</p> <p>9) 0.9m Schooling Jumper 10) 0.9m Jumper</p> <p>11) 0.90m Jumper Equitation Challenge*</p>	<p>11:00am Start</p> <p>12) 0.90m Jumper (not part of Equi-Cup) 13) 0.90m Jumper (not part of Equi-Cup)</p> <p>14) 1.0m Schooling Jumper 15) 1.0m Jumper</p> <p>16) 1.10m Schooling Jumper 17) 1.10m Jumper</p> <p>18) 1.15m Schooling Jumper (not part of Equi-Cup) 19) 1.15m Jumper Stake (not part of Equi-Cup)</p>
<p>*For more information on the Equi-Cup Series Please visit: www.equicup.com</p>	

Number of Classes _____ X \$25.00 \$ _____

Paramedic Fee \$ 25

Administration Fee \$ 30 (includes Equi-Cup Fee)

Day stall (limited) X \$40 \$ _____

Late Fee -\$20 \$ _____

G.S.T. @ 5% \$ _____

TOTAL: \$ _____

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Date: _____ Rider Name: _____

Rider Signature: _____

Parent/ Guardian Name: _____

Signature of Parent/ Guardian (if under 18 years old): _____