MRC Ranch Riding Show Entry May 20, 2023

Rider Number

Show starts at 9am - One Form per Horse/Rider Combination

Rider:						Phone:			
Address:					_City:	State:	Zip:		
Age:	(u	nder 18) Ema	ail Address (ı	required):					
		<u>(</u>	CIRCLE EA	CH CLASS	YOU INTEN	<u>D TO GO INTO</u>			
Classes									
Clas	ss #	Class #	Class#	Class #					
1		8	15	22					
2	2	9	16	Add					
3	3	10	17	Add					
4	l .	11	18	Add					
5	5	12	19	Add					
6		13	20	Add Add					
7	<u></u>	14	21	Auu					
Send Check	or Ope	n Check Only	. Payment by	cash is accep	table day of o	r pay online at www.meri	dianriding.com		
		<u>MAK</u>	E CHECKS	PAYABLE TO	D: MERIDIAI	N RIDING CLUB	-		
		,		-	-				
Show Entry F	Fees - F	Pre-Entry b	y May 15th	1	·	·			
□ MRC I	Membe	r: \$10 per c	lass: # clas	s	X \$10		=		
□ NON-N	□ NON-Member: \$13 per class: # class					+ \$5 arena	fee =		
Join Meridia	Join Meridian Riding Club: Membership Dues: \$40 Adult, \$20 Youth								
Show Entry	Fees -	Post-Entry	1						
□ MRC N	/lember	r: \$13 per cl	ass: # class	S	X \$13		=		
□ NON-N	/lember	: \$15 per e	/ent: # Ever	nts	X \$15 _	+ \$5 arena	a fee =		
CHK#		AMO	UNT \$			Open Check Y / N			
Show Secreta	ry Initia	ıls:	Tc	otal Paid: \$_				_	

Liability Agreement

I agree in consideration for my participation in this competition at Meridian Riding Club to the following:

I agree that I choose to participate voluntarily in this competition with my horse, as a rider, handler, lessee, owner, agent, coach trainer, or guardian of a minor exhibitor. I am fully aware and acknowledge that horse sports and 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 Meridian Riding Club, the Competition from all claims for money damages or otherwise any harm to me or my horses and for any harm caused by me or my horses to others, even if the harm resulted, directly or indirectly, from the negligence of Meridian Riding Club or the Competition.

I agree to expressly assume all risks of harm to me or my horse, including harm resulting from the negligence Meridian Riding Club, or the Competition.

I agree to indemnify that is, to pay any losses, damages, or costs incurred by Meridian Riding Club or the Competition and to hold them harmless with respect to claims for harm done to me or my horse, and for claims made by others for any Harm caused by me or my horse at the competition.

I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that Meridian Riding Club strongly encourages me to do so while WARNING that protective equipment cannot guard against all injuries.

If I am a parent or guardian of a minor exhibitor, I consent to the child's participation and AGREE to all above provisions and AGREE to assume all of the obligations of this Release on the child's behalf.

I AGREE that Meridian Riding Club and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers, members, clubs, and affiliated organizations.

BY SIGNING BELOW, I AGREE to be bound by all the applicable Rules and all terms and provisions of this entry form. I have read this agreement before signing it and agree to abide by the rules and regulations of the show.

All Signatures Mandatory

Rider:	
Signature:	
Print Name:	
Parent/Guardian (required if rider is a minor)	
Parent/Guardian (required if rider is a minor) Signature:	

SEND COMPLETED FORM TO:

Meridian Riding Club: Buffy Atwood 11202 119th St E Puyallup, WA 98374