

# Turner Farm Events, Inc. ~ Show Entry Form



Show Date: \_\_\_\_\_

Back Number: \_\_\_\_\_

Riders Name: \_\_\_\_\_ Age: \_\_\_\_\_ or Over 18 yrs.  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Horse/Pony Name: \_\_\_\_\_ Pony Size: S M L (check box)  
Coggins Accession # \_\_\_\_\_ Coggins Date \_\_\_\_\_ State \_\_\_\_\_  
Owner: \_\_\_\_\_  
Address \_\_\_\_\_

Trainer Name: \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

**Class Numbers:** 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22  
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 Warm-up

### Turner Farm Release, Must be Signed.

Acting as agent for the rider(s) listed above, agree to abide by the rules of this competition, Turner Farm Events, Turner Farm Park and the Fairfax County Park Authority. Further, agree that will not hold Turner Farm Events, Turner Farm Park, the Fairfax County Park Authority, Virginia Horse Show Association, their employees or the paid and volunteer staff of this Competition responsible for any accident, injury or loss occurring anywhere on these grounds while we are here for this competition.

I acknowledge that there are intrinsic dangers in equine activities, which typically are conducted within the facilities and on the grounds of any horse center, stable, or similar enterprise. "Intrinsic dangers of equine activities" means those dangers or conditions that are an integral part of equine activities, including, but not limited to, (i) the propensity of equines to behave in ways that may result in injury, harm, or death to persons on or around them; (ii) the unpredictability of an equine's reaction to such things as sounds, sudden movement and unfamiliar objects, persons, or other animals; (iii) certain hazards such as surface and subsurface conditions; (iv) collisions with other animals or objects; and (v) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant's ability.

Each of the undersigned being duly aware of the risks and hazards inherent upon entering upon said premises, and/or in participating in or observing the riding or handling of horses, hereby elects voluntarily to enter upon said premises and assumes all risks of loss, damage or injury that may be sustained by any or each of the undersigned or any property of any or each of any of the undersigned while in, on or upon said premises. This release shall be binding upon the distributes, heirs, next of kin, executors, administrators and guardians of each of the undersigned.

Owners or Agents Signature (Parent/Guardian, if rider is under 18). If P/G is not available, Trainer must sign.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

----- ADMIN SECTION ONLY -----

Payment: Number of Classes \_\_\_\_\_ X \$15.00 = \_

Administration Fee \$20.00

**Total** \_\_\_\_\_ **Cash** \_\_\_\_\_ **Check #** \_\_\_\_\_