## **Ulster County Horse Council Open Horse Show** to Benefit Ulster County 4-H Horse Program Saturday, May 11, 2019

Name	DOB/Entry Number						
Address	essTownStateZip						
E-mail4-H Club/ Trainer							
Phone Name of Horse Current Coggins Rabies							
Division	Class Numbers (please circle)	# of classes	\$10/class NYSHC or 4-H Members, \$12/class open to all	Total			
English Walk-trot	2, 6, 7, 8, 29		X \$10.00 or 12.00	= \$			
Short Stirrup	3, 9, 10, 11, 30		X \$10.00 or 12.00	= \$			
Novice Hunter/Equitation	4, 12, 13, 14, 31		X \$10.00 or 12.00	= \$			
2' Hunter/Equitation	16, 17, 18, 32		X \$10.00 or 12.00	=\$			
2'6" Hunter/Equitation	19, 20, 21, 32		X \$10.00 or 12.00	=\$			
3' Open Hunter/Equitation	22, 23, 24, 25, 32		X \$10.00 or 12.00	= \$			
4-H Combined	1, 5, 15, 36, 40, 47		X \$10.00 or 12.00	=\$			
Western Walk-jog	33, 37, 41, 42, 43		X \$10.00 or 12.00	=\$			
Novice Western	34, 38, 44, 45, 46		X \$10.00 or 12.00	= \$			
Open Western	35, 39, 48, 49, 50		X \$10.00 or 12.00	= \$			
Lead-line	26		X \$10.00 or 12.00	= \$			
Games*	27, 28		X \$5.00	= \$			
Driving	51, 52, 53		X \$10.00 or 12.00	= \$			
Donkey	54, 55, 56, 57		X \$10.00 or 12.00	= \$			
*Games count only toward h		1		Total due = \$			
RELEASE FROM LIABILITY: Horseback riding ASTM/SEI 1163 approved helmets required for minors, encouraged for all.  This LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK is made and entered into this day by and between Ulster County Horse Council, Inc. and their Board Members and Participant, and if participant is a minor, Participant's parent or guardian. In return for today's participation and use of facilities at the Ulster County Horse Council sponsored event and on all future dates, with regards to the use of property, facilities and services of the Ulster County Horse Council, Inc., and the participating landowners (Ulster County, Ulster County Agricultural Society), Participant his/her heirs, assigns and legal representatives, hereby expressly agree to the following: I understand that the sport of horseback riding and driving is inherently dangerous and that serious injury and death can occur. I understand that participation in equine activities involves necessary risks. I agree that if any injury occurs to my horse or myself or to any equipment that I may use or send to use, I will make no claim against the Ulster County Horse Council, Inc., and/or any of the officers, directors, trustees, employees and volunteers, or against Ulster County or the Ulster County Agricultural Society. I further agree to hold the aforementioned free and harmless from any liability, claims, suits, or damages of whatsoever kind or nature that may be occasioned by the horses used by me or the negligence of the persons in charge of such horses and I agree to indemnify and hold harmless these organizations and individuals against all liability claims, suits and expenses, including attorney fees incurred arising out of any injury to any person or damage to any property caused by me, my horses or attendants. I fully understand the above and agree to abide by all Ulster County Horse Council and New York State Horse Council rules, policies and specifications for this type of event. This contract is non-assignable and non-transferable							
Name of Participant (please p Minors- both parents must si	_	nature		Date			
Name of Parent/ Guardian	Sig	nature		Date			
Name of Parent/ Guardian	Sig	nature		Date			
Address:	ddress: Phone Number:						
Emorgoncy Contact:			Phono Number				