Entry Form

Willow Hill Farm Horse Show

Class Numbers			Competition #			
			Name of Horse		Horse WHVPHA#	Make checks payable to **Willow Hill Farm**
			Name of Rider	Email:	Rider WHVPHA#	Circle One: Junior / Amateur / Pro
			Name of Owner	Email:	Owner WHVPHA#	Total Fees (includes $5 EMT Fee) $10.-
			Trainer/Barn Affiliation	Email:	Trainer WHVPHA#	Paid Check / Paid Cash

THE UNDERSIGNED ASSUMES THE UNAVOIDABLE RISKS INHERENT IN ALL HORSE-RELEATED ACTIVITIES, INCLUDING BUT NOT LIMITED TO BODILY INJURY AND PHYSICAL HARM TO HORSE, RIDER, AND SPECTATOR.

In consideration, therefore, for my privilege of boarding at, entering and riding in Willow Hill Farm the undersigned does hereby agree to hold harmless and indemnify Willow Hill Farm its agents, assignees and employees, and further releases them from any claims, liability or responsibility for any harm, accident, damage, injury, or illness to me or my horse and for any injury or damage caused by me or my horse to others, even if the injury or damage resulted directly or indirectly from negligence of Willow Hill Farm, its agents or employees.

"Inherent risks of equine activities" shall mean those dangers or conditions which are an integral part of equine activities, including, but not limited to:
(i) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and/or damage to property in their vicinity;
(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 objects;
(iv) collisions with other equines, animals, people and objects;
(v) the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or to act within his or her ability The undersigned acknowledges and agrees that entry of my horse in this horseshow is as a boarder at Willow Hill Farm for the time I am on the premises and entered in the horseshow and will abide by the farm rules and procedures. I understand that I choose to participate voluntarily in the competition. I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

In the event that the Undersigned is under the age of 18, the signature of a parent or guardian is required. If I am the parent of a junior rider, I consent to my child's participation in this event (child is indicated in Riders Signature/Print) and agree to assume all of the obligations and responsibilities under this agreement on my child's behalf.

_____ _____
Rider's Signature Print

_____
Address

_____, _____ _____
City State Zip

_____ ( ) _____ ( ) _____
Telephone Cell Phone

_____
Parent/Guardian if Minor

Trainer Coach

Owner/Agent

Signature _____ _____

Print _____ _____

Trainer's Address

_____
Address

_____, _____ _____
City State Zip

Phone Number & Name of Emergency Contact While At This Show

_____
Emergency Phone Number and Name of that person