Deep Sigh Equestrian Center Entry Form

Entry													
# (office use)	Name of Ho	rse				Name of Rider					Age	Date	
	Member	Sex	Height	Age	Green	Classes/Division	s Entered	(Please	Check Divi	sion and I	ist Class nam	ne and #)	
Enter On Line at http://www.dshorsefarm.com													
Entries Can be Email to dshorsefarm@gmail.com							Senior	Youth	Novice	Open	Pee Wee	Advanced	
constitution and all other rule and all other rules and regul employees, and agents harr the stable where the show is I further agree that if any da this show harmless from any	les and regulations of the lations of the association mless for any injury or lo s held shall not be responsage shall be occasion y claim or demand what reason of any claim or d	e association n and the sho oss resulted, onsible for los ed or loss oc soever kind of	as well as the keep will accept as directly or indirects, damage, or incur, by fire or other nature that mappessaid. I hereby	ocal rules of final the de ctly, from the njury to spe nerwise, to ay be occas	f the show (2) the ecision of the He e negligent acts ctator, exhibitor, horses exhibited ioned by the hor	the person making it, along wi at every horse and/or rider is e aring Committee on any quest or omissions of said officials, o tack, trailers or automobiles. T or to any vehicle or other artic se or horses exhibited by me on the event that entry or entries	eligible as enteredions arising under directors, employ the construction of the that I may sen or the negligence	d (3) that the own or said rules and ees, or agents of or application or d with such hors e of the person in	ner and any of his agrees to hold the f the association association rules ses, that I will make a charge of such I	s/her represental e association, the or show (4) that are governed by ke no claim there thorses, and to re	tives are bound by the ne show, and their office the management and y the laws of the State efore, and I further agree epay to this show on d	e constitution cials, directors, I tenants of e of South Carolina. ree to hold demand, all	
Owner Informat		Rider Information:											
Owner Name		Rider Name											
Address						Address							
City/State/Zip						City/State/Zip							
Phone						Phone							
Email						Email							
Trainer Informa	tion:					Entry Fees:							
Trainer Name							Classes	\$15		_			
Address						Division \$35 (3 classes)							
City/State/Zip							_ Stalls @) \$25/day					
Dhono						¢ 45 00	Cround	s/office fe	•				
Phone						<u>\$ 15.00</u> \$			е				
Email						·		ntry Fee					
			A si	gned c	heck mu	st be left in office	before nu	umbers w	vill be issu	ied			
Owner Name	Rider Name									Trainer Name			
Signature	Signature					Signature							

WARNING: UNDER SOUTH CAROLINA LAW,AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN AN EQUINE ACTIVITY RESULTING FROM AN INHERNENT RISK OF EQUINE ACTIVITY. PURSUANT TO ARTICLE 7, CHAPTER 9 OF TITLE 47, CODE OF LAWS OF SOUTH CAROLINA, 1976.

If rider is not 18, Parent/Guardian Signature

If rider is not 18, Parent/Guardian Signature