

Maine Dressage Society

SCHOOLING SHOW ENTRY FORM

Competitors are responsible for duplicating additional copies of entry form.
One horse per entry. Signatures required. Mail to Show Secretary.

OFFICIAL USE	
Date Rec'd _____	
Due _____	
Entry Complete Date _____	

COMPETITION NAME AND DATE

AMOUNT PAID WITH ENTRY	
\$ _____	Check Number _____

RIDER	
Street _____	
Town/State/Zip _____	
Phone #1 _____	
Email _____	
Vintage _____	Senior _____ JR/YR(DOB required) _____ / _____ / _____
Club Membership (please circle)	
EMDA	CMDA SMDA WMDA

OWNER	
Street _____	
Town/State/Zip _____	
Phone #1 _____	
Email _____	
Vintage _____	Senior _____ JR/YR(DOB required) _____ / _____ / _____
Club Membership (please circle)	
EMDA	CMDA SMDA WMDA

HORSE

Breed _____
Age _____ Height _____
Color _____

CLASSES ENTERED		
Number	Description	Entry Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Class Entry Fees.	_____
Number Deposit. (see competition specs)	_____
Office Fee. (see competition specs)	_____
Non-member Fees. (see competition specs)	_____
Penalty Fees. (see competition specs)	_____
Post Entry Fees. (see competition specs)	_____
TOTAL DUE WITH ENTRY	_____

Documents Attached: _____ Negative Coggins _____ Rabies Certificate Other _____
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THIS IS A RELEASE OF LIABILITY. PLEASE READ IT CAREFULLY BEFORE SIGNING.

WARNING - Under Maine law, an equine professional has limited liability for an injury or death resulting from the inherent risks of equine activities.

The undersigned owner, rider, and signing parent or guardian hereby agrees:

I am fully aware that horse sports and competition involve inherent dangerous risk and I expressly assume any and all risks of injury or loss suffered during or in connection with the competition and **I agree to release** the dressage club, or other organization sponsoring this competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held, from any loss, damage, liability or injury arising out of or resulting from this competition or rider's participation or entry therein, whether or not such injury or loss resulted directly or indirectly **from the negligent acts or omissions** of the management of the competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held. In the event of injury to the rider or rider's animal permission is hereby granted for emergency medical treatment for rider or rider's animal.

I further agree to **indemnify, hold harmless and defend the dressage club or other organization** sponsoring this competition, the management of the competition, and their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held from and against **any and all claims for loss, damages, liability, injury, or death, however caused**, resulting directly or indirectly from the rider's entry or participation in this competition or from acts or omissions of rider or rider's agents. I further agree to be subject to the rules of the dressage club or other organization sponsoring this competition.

Rider Signature _____ Print Name _____ Date _____
 If Rider is under 18
 Parent or Guardian Signature _____ Print Name _____ Date _____
 Owner Signature _____ Print Name _____ Date _____