

WESTON DRESSAGE & 2-PHASE EVENT
Sunday, May 8, 2011

Make check payable to: Weston-Wayland Open Spring Horse Show, Inc.
Mail Entries to: Linda Cabot, PO Box 3252, Framingham, MA 01705

email: WestonShows@yahoo.com
Phone: 508-788-9181

ONE HORSE/RIDER PER ENTRY FORM		CLASS	FEE
HORSE	NO:		
RIDER			
ADDRESS	AGE		
CITY/ST/ZIP			
PHONE	EMAIL (for times)	NUMBER DEPOSIT	2.00
OFFICE USE: COGGINS _____ SIGNATURES _____ ENTRY FEES _____		TOTAL FEES	

Entries must be made on an official show form or photocopy, and must be signed by an adult (parent or legal guardian). All entries must be accompanied by payment, and **must be received** no later than Wednesday, April 27, 2011. Refund of entry fees available only with a veterinary and/or physician's certificate, which has been received prior to the closing date unless space can be filled from the waiting list.

Entry Fees:
Dressage Test = \$25.00
2-Phase Event = \$40.00
X-Country Pace = \$25.00

ENTRIES CLOSE WEDNESDAY, APRIL 27, 2011. ALL ENTRIES MUST BE RECEIVED BY THIS DATE
POST ENTRY FEE FOR LATE ENTRIES THAT ARE ACCEPTED (FIRST COME, FIRST SERVED) = \$10.00

Proof of negative Coggins within one year must be shown
Numbers **will not** be assigned without proper signatures

I make these entries at my own risk and subject to the rules and regulations of the Show and the US Equestrian Federation, and agree to be bound hereby. I am aware of the inherent risks and dangers involved in horseback riding, including the possibility of a fatal or permanently (mentally or physically) disabling or crippling injury or dismemberment to myself, to others for whom I am responsible, or to my or our animals. I agree to make no claims against the Weston Dressage & 2-Phase Event, Weston-Wayland Open Spring Horse Show, Inc., their sponsors, officials, benefactors, and/or the Town of Weston, MA against seeking liability and recovery for damages or injury caused to myself, my animals, or to my vehicles, equipment, or any persons and/or animals for whom I am responsible. I have carefully read this release and waiver of liability and realize that by signing it, I am giving up any right I may have to sue or otherwise recover for said damages or injuries. It clearly represents my intent by signing it, and is intended to and shall be binding upon my estate, heirs, agents, representatives, successors and/or assigns. If I am a minor, this release and waiver of liability shall be countersigned by my legal custodian, guardian, parent, or other person who is legally empowered to act on my behalf in these premises.

UNDER MASSACHUSETTS LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR DEATH OF, A PARTICIPANT IN EQUINE RELATED ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO CHAPTER 128, SECTION D OF THE GENERAL LAWS.

Signature (Rider over 18 years, or parent of minor)

Date