

GAMBLER'S CHOICE EQUESTRIAN CENTER

238 Grey Fox Lane Dover, Delaware 19904

302.389.8330 Fax 302.653.0777 Office

Class Numbers				Name of Horse				Date You are Showing				
								Feb-10	Feb-10	Mar-10	Mar-10	Apr-10
				Height	Sex	Age	Color	If Check is enclosed, make payable to: Gambler's Choice Equestrian Center Mail or fax entries to the address or number above.				
				Pony Height	SM	MD	LG					

I have read the Gambler's Choice Equestrian Center (GCEC) Entry Agreement as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to GCEC Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Federation must be brought in Delaware State.

Federation Release, Assumption of Risk, Waiver and Indemnification

This document waives important legal rights. Read it carefully before signing. I AGREE in consideration for my participation in any or all of these Competitions, Gambler's Choice Equestrian Center Schooling Series. I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as a parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("Harm"). I AGREE to release GCEC and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the harm resulted, directly or indirectly, from the negligence of GCEC or the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the GCEC or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred) by the GCEC or the Competition and to hold them harmless with respect to claims for harm to my or my horse, and for claims made by others for any harm caused by me or my horse at the Competition. I have read the Rules about protective equipment and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior exhibitor, I consent to the minor's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the minor's behalf. I AGREE that the "GCEC" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. I represent that I have the requisite training, coaching and abilities to safely compete in this Competition. BY SIGNING BELOW, I AGREE to be bound by all applicable GCEC Rules, and all terms and provisions of this entry blank.

Entry Fee _____	* \$8.00 =	
# of classes <i>pre-entry</i>		
Entry Fee _____	* \$10.00 =	
# of classes		
Office Fee		\$5.00

	Total:
ALL ENTRIES MUST HAVE A CURRENT COGGINS ATTACHED.	

For office Use

Check # _____

Name of Owner/Agent	Name of Rider	Name of Trainer
Address: _____	Address: _____ AGE _____ Circle one	Address: _____
Email: _____	Email: _____ Adult _____	Email: _____
Signature: _____	Signature: _____ Jr Age: _____	Signature: _____
	Parent/Guardian must sign if under 18.	