

**CornerStone Summer Classic National Gold Show Entry Form August 26-28, 2016 Entry Closing Date: August 8, 2016**

**HORSE NAME** \_\_\_\_\_ **Age** \_\_\_ **Gender** \_\_\_ **Breed** \_\_\_ **PASSPORT** \_\_\_\_\_

**OWNER NAME** \_\_\_\_\_  
**Owner Address** \_\_\_\_\_  
**Town/Prov** \_\_\_\_\_ **Postal Code** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_  
**Email** \_\_\_\_\_  
**Owner EC#** \_\_\_\_\_ **OEF#** \_\_\_\_\_  
 I have read the conditions on this entry form and hereby agree to all of the terms.  
**Owner Signature** \_\_\_\_\_

**RIDER NAME** \_\_\_\_\_  
**Rider Address** \_\_\_\_\_  
**Town/Prov** \_\_\_\_\_ **Postal Code** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_  
**Amateur** \_\_\_ **Junior** \_\_\_ **DOB:** \_\_\_\_\_  
**Email** \_\_\_\_\_  
**Rider DC/EC#** \_\_\_\_\_ **OEF#** \_\_\_\_\_  
**Rider Signature** \_\_\_\_\_

I have read the conditions on this entry form and the prize list and hereby agree to all of the terms:

**NAME(print)** \_\_\_\_\_  
**Person Responsible Signature** \_\_\_\_\_  
**EC Sport License #** \_\_\_\_\_  
**Parent/Guardian Signature** \_\_\_\_\_  
 (required for all junior riders)  
**TRAINER** \_\_\_\_\_

**PLEASE READ CAREFULLY –No entry will be accepted without proper signatures.**

Every entry at a recognized competition shall constitute an agreement that all participants (which include, without limitations, the owner, lessee, trainer, manager, agent, coach, driver, handler and the horse) for themselves, their principals, representative, employees and agents (1) shall be subject and bound by the constitution and rules of Equine Canada and the local rules of the competition; (2) Represent that every horse, rider, driver, and handler is eligible as entered; (3) Agree that they participate voluntarily in the competition fully aware that horse sports and the competition involve inherent dangerous risk of serious injury or death, and accept that no helmet or protective equipment can protect against all foreseeable injury, and by participation they expressly assume any and all risks of injury or loss, and they agree to indemnify and hold EC, CornerStone, the competition and their officials, directors, employees and agents harmless from and against all claims including for any injury or loss resulted directly or indirectly from the negligent acts or omissions of said officials, directors, employees or agents of Cornerstone.. Your signature on this form indicates your acceptance of and compliance with the above statement.

Class #	GOLD Class Description	Day	If entering Test of Choice indicate here the test to be ridden	Fee

**Alternative Payee: Any Money owing is automatically paid to the owner. Please check box if different and provide address.**

**Rider:** \_\_\_\_\_  
**Trainer:** \_\_\_\_\_  
 \_\_\_\_\_  
**Postal Code:** \_\_\_\_\_

**CORNERSTONE**  
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 csfhorses@aol.com  
 www.cornerstonefarms.com

<b>Total Entry Fees</b>	
<b>Camper Fee @ \$175 per camper</b>	
<b>Administration Fee</b>	<b>\$50.00</b>
<b>Stalls/Tack Rooms @ \$185 each # _____</b>	
<b>Fax / Email Fee without payment @ \$10</b>	
<b>EC Drug Fee</b>	<b>\$7.00</b>
<b>Paramedic Fee</b>	<b>\$6.00</b>
<b>Sub Total</b>	
<b>HST @ 13%</b>	
<b>Sub Total</b>	
<b>DC Levy</b>	<b>\$10.00</b>
<b>Total Enclosed</b>	