

CornerStone Spring Into Dressage National Gold Show Entry Form June 3-5, 2016. Entry Closing Date: May 16, 2016.

HORSE NAME _____ **Age** _____ **Gender** _____ **Breed** _____ **Colour** _____ **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 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: Prize Money is automatically paid to the owner. Please provide address below if different from owner.
Name _____
Address _____

Postal Code: _____

CORNERSTONE
 674541 Hurontario Street,
 Mono, Ontario, L9W 5S1
 Phone: 519-941-2340
 Fax: 519-941-8096
 csfhorses@aol.com
 www.cornerstonefarms.com

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