

# RMSJ CARROTS & COCKTAILS SERIES I ~ 2012

## HORSE INFORMATION

Name:	
Breed:	
Age:	Mare / Geld / Stallion
Height:	Ponies: SM / MED / LRG
Passport #:	

## OWNER INFORMATION

Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
EC #:	Bronze / Silver / Gold / Platinum
RMSJ Rewards #:	
Date of Birth:	

## RIDER ONE INFORMATION

Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
EC #:	Bronze / Silver / Gold / Platinum
RMSJ Rewards #:	
Date of Birth:	

## TRAINER INFORMATION

Name:	
Stable Name:	
Email:	
EC #:	Bronze / Silver / Gold / Platinum

### Rider One Classes: Check Schedule for Class #'s


### Rider Two Classes: Rider Name: \_\_\_\_\_ Check Schedule for Class #'s


## WAIVER

I hereby certify that every horse and rider is eligible as entered and agree for myself and my representatives to be bound by the Equine Canada Rules and Regulations and the Rocky Mountain Show Jumping 2012 Prize List including, without limitation, the Code of Conduct and the Liability clauses. I understand that the Equine Canada divisions of the Rocky Mountain Classics are governed by Equine Canada in which case I accept the rules and regulations of Equine Canada and all the Rocky Mountain Show Jumping Tournaments will be governed by the laws of the land and if there are suspicious incidents, the proper authorities will be called in to handle these situations. I have read and understand the above rules and guidelines as listed above in the 2012 prize list.

Signature of Person Responsible: \_\_\_\_\_

(Article A1011 Person responsible for the care/custody training and performance of the horse)

\_\_\_\_\_  
Signature of Owner/Agent

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Rider

\_\_\_\_\_  
Signature of Trainer

TOTAL ENTRY FEES:	\$
OFFICE/ADMIN FEE:	\$35.00
PARAMEDIC FEE:	\$25.00
LATE FEE (\$30):	\$
STABLING (\$50/Day): circle days: SAT / SUN	\$
STABLING (\$10) Overnight: FRI / SAT	\$
<b>SUB TOTAL:</b>	\$
<b>G.S.T. 5%</b>	\$
DRESSAGE CANADA LEVY FEE	\$7.00
EC DRUG FEE	\$3.50
<b>TOTAL:</b>	\$

Credit Card #: \_\_\_\_\_ ex: \_\_\_\_\_ / \_\_\_\_\_

Cardholder Name & Signature: \_\_\_\_\_

Incomplete entry forms will not be accepted. Payment in full must accompany entries.

Fax entries to: (403) 201-7863

**Closing Dates:** Carrots & Cocktails Series I - January 27th  
Carrots & Cocktails Series II - February 24th  
Carrots & Cocktails Series III - March 30th



online entries available at: [www.rmshowjumping.com](http://www.rmshowjumping.com)