

HORSE INFORMATION:

RIDER ONE INFORMATION:

RIDER TWO INFORMATION:

Name:			
Breed:			
Age:	Mare / Geld / Stallion		
Height:	Ponies: SM / MED / LRG	1 st YR	2 nd YR
Passport #:			

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

Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
EC #:	Bronze / Silver / Gold / Platinum
RMSJ Rewards #:	CEDL / AHHS #:
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: Check Schedule for Class #'s

TOTAL ENTRY FEES:	\$
OFFICE/ADMIN FEE:	\$35.00
PARAMEDIC FEE:	\$20.00
LATE FEE (\$200):	\$
GRAND PRIX RING NOMINATION FEE (\$150):	\$
JUMPER II RING NOMINATION FEE (\$60):	\$
PERMANENT STABLING \$200	\$
TEMPORARY STABLING \$150	\$
SUB-TOTAL:	\$
GST - 5% of the above total:	\$
EQUINE CANADA DRUG FEE:	\$7.00
JUMP CANADA LEVY FEE:	\$10.00
C.E.D.L. / AHHS LEVY FEE:	\$10.00

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 2010 Prize List including, without limitation, the Code of Conduct and the Liability clauses. I understand that the Equine Canada divisions of the Bow Valley Classics are governed by Equine Canada in which case I accept the rules and regulations of Equine Canada and the 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 2010 prize list.

Signature of Person Responsible: _____
(Article A1011 Person responsible for the care/cusody training and performance of the horse)



Signature of Owner/Agent _____

Signature of Parent/Guardian _____

Signature of Rider _____

Signature of Trainer _____

Credit Card #: _____ ex: _____ / _____

Cardholder Name & Signature: _____

Stable request form must accompany any entries requesting a stall.