RMSJ Winter Training Series III- Jumper
March 22 - 23, 2008
Calgary, Alberta

Mail To: RMSJ WTS III - Jumper
Suite 231
132-250 Shawville Blvd SE
Calgary, AB T2Y 2Z7

Entries Close: **Friday March 14, 2008**

Rider of Horse	Telephone #	Email

Address	City	Postal Code

Name of Horse	DEVELOPING RIDERS TOUR POINTS circle one YES NO

AEF # (required)	ASJA #	circle one JUNIOR / AMATEUR / PROFESSIONAL

Trainer	Stable Name

Class Numbers				
Class Fee or Divsions Fee				

This Document will affect your legal rights and liabilities, Please Read Carefully

Rocky Mtn Show Jumping, Anderson Ranch, Caroline Jones, nor the owners, management, tournament committee, nor any of its staff or agents shall in any way be liable for any accident, injury, damage, loss or for any other matter that may happen to exhibitors, competitors, owners, or members of their families, or their agents or to anyone on the grounds, or for any other loss, claim, matter, circumstances or event whatever, in connection with or arising out of, or attributable to, the tournament or any journey to or from the tournament. It is understood that under no circumstances shall Rocky Mtn Show Jumping, Anderson Ranch, Caroline Jones, nor the owners, management, tournament committee, nor any of its staff or agents be liable for any loss, damages, claims or costs as a result of Rocky Mtn Show Jumping, Anderson Ranch, Caroline Jones, nor the owners, management, tournament committee, nor any of its staff or agents, negligence, and that you agree to indemnify and save harmless Rocky Mtn Show Jumping, Anderson Ranch, Caroline Jones, nor the owners, management, tournament committee, nor any of its staff or agents from and against any and all liability arising out of any such loss, damages, claims or costs.

Signature of Rider _____

Date_____ if rider is under eitghteen years, the parent / guardian must also sign below.

I acknowledge as Parent / Guardian of _____ that I have read and fully understood and agree to the terms and conditions stated herein of_____ and myself.

Parent / Guardian_____

Date _____

Entry will not be accepted without Parent or LEGAL Guardian signaure.

CREDIT CARD #_____ **ex.** _____

Total Entry Fees	**$**
Post Entry Fee $30.00 After Closing	**$**
Office/Admin/ Paramedic Fee	**$ 30.00**
Stabling ($50 / day) Please Circle One Fir / Sat / Sun	**$**
ASJA 3 Star Series Fee	**$ 7.00**
Sub Total	**$**
G.S.T 5%	**$**
Deposit Fee (refundable)	**$ 30.00**
TOTAL FEES	**$**

Make Cheques payable to RMSJ
Deposit Must be recieved with entry inorder to be accepted

For further information contact: RMSJ (403)256-8652