

Seacoast Show Series						Date: _____		USHJA #	# ASSIGNED	
Name of Horse			HORSE OWNER				PONY SIZE			
							<input type="checkbox"/> Small <input type="checkbox"/> Med <input type="checkbox"/> Large			
Rider #1 Name	Age		ADDRESS	PHONE	CLASSES			Total Fees		
Rider #2 Name	Age		ADDRESS	PHONE	CLASSES			Total Fees		
SIGNATURES BELOW INDICATE THAT EACH OF US HAS READ AND UNDERSTANDS THE FOLLOWING STATEMENT								Total Entry Fees		
<p>Under New Hampshire law, a participant in equine activities assumes the risk of any injury, harm, damage, or death and any legal responsibility that may occur to a participant from the inherent risks associated with equine activities. Pursuant to R.S.A 508:19, Equine Professionals are not liable for damages resulting from the inherent risks of equine activities. All owners and exhibitors will be held responsible for any damages incurred by them, their agents or employees to buildings, stalls, rings and other properties on show grounds, and will be billed accordingly. Every entry at a recognized show shall constitute an agreement and affirmation that the person making it, along with the owner, lessee, trainer, manager, agent, coach, rider, and the horse: (1) shall be subject to the rules of the show; (2) that every horse and rider are eligible as entered; (3) that the owner, rider, and any of their agents or representatives agree to hold the show, and its officials, directors, employees and agents harmless for any injury or loss suffered during or in connection with the show, whether or not such injury or loss resulted, directly or indirectly, from the negligent acts or omissions of said officials, directors, employees or agents of the show. I agree to hold harmless Seacoast Show Series, Brookvale Pines Farm, Friendship Field Farm, LLC, and any show officials, directors, staff, volunteers and agents from any damage or injury that occurs to any horse or rider, including myself, that I bring to any of the listed show dates: April 27, 2024; May 18, 2024; June 15, 2024; July 27, 2024; August 10, 2024; September 7, 2024.</p>										
								Office Fee		\$20.00
								USHJA Fee		\$3.00
								Warm - Up(s)		
								Post Entry Fee		
								SUB TOTAL		
								3.5% CC Fee		
								GRAND TOTAL		
								PAYMENT		
Trainer Name: _____ Trainer Signature _____								Mail Entries to: 1 Conifer Rd. Rindge, NH 03461		
								Email Entries to: kara.quigley@ymail.com		
								Enter Online at: www.horseshowing.com		

X _____
Riders 1 Signature (parent must sign for minor)
 Name _____
 Address _____
 City _____
 State/Zip _____
 Phone _____

X _____
Rider 2 Signature (parent must sign for minor)
 Name _____
 Address _____
 City _____
 State/Zip _____
 Phone _____

X _____
Owner/Agent Signature
 Name _____
 Address _____
 City _____
 State/Zip _____
 Phone _____

Trainer Name: _____
Trainer Signature _____

Address: _____
Phone: _____