

2020 EAU CLAIRE BIT & SPUR, INC

* Required
Data

SATURDAY PLEASURE SHOW ENTRY FORM

* Entry #: _____ Show Date: _____

* Rider's Name:	<p style="text-align: center;">----- For Office Use Only -----</p> <p>Member: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Copy of current Coggins</p> <p><input type="checkbox"/> Stall # _____ assigned @ barn</p> <p><input type="checkbox"/> Stall Information Card Given</p> <p><input type="checkbox"/> Stall deposit check received</p> <p><input type="checkbox"/> Payment method:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Cash</p> <p style="padding-left: 20px;"><input type="checkbox"/> Check (Number _____)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Open Check (# _____)</p> <p>For Entry Numbers: _____</p> <p><input type="checkbox"/> Received by: _____</p> <p>Note to office staff: Write entry number on all checks. <u>Closed checks</u> - file w/cash. <u>Open checks</u> - attach to first rider's entry form after including all riders' numbers on entry form and check.</p>
Rider's Address:	
City: State: Zip:	
Phone: Cell - Home -	
* Horse's Name as you want it announced:	
Horse's Age:	
* Rider Category - Circle Age Group	
Walk/Trot 10 & Under 11 - 13 14 - 17 18 - 34 35 - 49 50 & Over	
* Circle Classes To Be Entered (Please enter at least 3 classes ahead.):	
<p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19</p> <p>20 21 22 23 24 25 26 27 28 29 30 31 32 (Lunch) 33</p> <p>34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49</p> <p>50 51 52 53 54 55 56 57 58 59 60 61 62</p> <p style="color: blue; font-weight: bold;">W/T HORSES CANNOT ENTER 3-GAITED CLASSES IN THE SAME SHOW.</p>	

Entry Office Hours: Friday 6:00 - 8:00 pm; Sat & Sun 7:00 am;

----- FOR OFFICE USE ONLY -----	
\$5.00 Office fee per number (Office fee waived for Bit and Spur Members)	\$
Total Number of classes entered _____ x \$4.00 = _____	\$
Weekend Stall Fee: \$35/stall x _____ (quantity, including tack stalls) Stall(s) Deposit Check # _____ Amount \$ _____	\$
Daily Stall Fee: \$20/stall x _____ (quantity, including tack stalls) Stall(s) Deposit Check # _____ Amount \$ _____	\$
Camper Hookup: \$35/hookup x _____ (quantity)	\$
Addl. Shavings: \$7.00/bag x _____ (number of bags)	\$
Total Due:	\$
<i>No refunds issued.</i> (One-day open checks only)	

HARD HAT/HORSEBACK RIDING RELEASE WAIVER

I have read the Eau Claire Bit & Spur, Inc. Release Waiver on the back of this form and understand the unavoidable risks inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider, spectator and property as noted in that document and as defined in Sec 895.481E of the Wisconsin Inherent Statutes.

Print Name of Rider: _____ Signature of Rider: _____

* Signature of Parent, if rider under 18 years old: _____ Date: _____

ENTRIES CANNOT BE PROCESSED WITHOUT SIGNATURE & DATE.

Hard Hat/Horseback Riding Release Waiver

It is statistically clear that there are certain inherent dangers associated with horseback riding. One of those dangers is the risk of suffering serious head injuries should the rider fall or be thrown from his/her horse. It is therefore the policy of Eau Claire Bit & Spur, Inc., members and directors, that safety helmets should be worn at all times when riders are mounted.

I, _____ (initial) being fully aware of that policy and the reasons for it, choose of my own free will, not to wear a safety riding helmet. In taking this action, I hold Eau Claire Bit & Spur, Inc., members and directors, and their insurers, free of any liabilities for injuries that I may receive as a result of my actions and failure to wear a safety riding helmet.

****NOTICE:** A person who is engaged for compensation in the rental of equine equipment or tack or in the instruction of a person riding or driving of an equine is not liable for the injury or death of a person involved in equine activities resulting from the inherent risks of equine activities, as defined in section 895.481 (1) (e) of the Wisconsin Statutes.

I hereby have entered this Horse Show/Clinic at my own risk, subject to all rules and regulations at this event. I further agree in case of injury or damage to myself, persons, horses, or property, Eau Claire Bit & Spur, Inc., members and directors are not held responsible and will make no claims against said Eau Claire Bit & Spur, Inc., members and directors. I also understand that the use of riding helmets is recommended.

In addition, the undersigned** assumes the unavoidable risks inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider, spectator, and property.

In consideration, therefore, for the privilege of riding, and/or working around horses on the Eau Claire Bit & Spur, Inc. show grounds, located in Eau Claire, Wisconsin, the undersigned** does hereby agree to hold harmless and indemnify the Eau Claire Bit & Spur, Inc., their agents, and assignees, and further release them from any liability or responsibility for accident, damage, injury, or illness to the undersigned** or to any horse owned by the undersigned** or to any family members or spectators accompanying the undersigned** on the premises.

“Inherent risks of equine activities” shall mean: those dangers or conditions, which are an integral part of equine activities, including, but not limited to:

- The propensity of any equine to behave in ways that may result in injury, harm or death to a person(s) on or around them and/or damage to property in their vicinity;
- The unpredictability of an equine’s reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals;
- Certain hazards such as surface and subsurface objects;
- Collisions with other equines, animals, people, and objects;
- The potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or to act within his or her ability.

****Signature on Entry Form**