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**Entry Form**  
**Doubletree Horse Farms Show**

**Paid**

Circle one please

**RIDER:** **Youth 12-U, Youth 13-18, Beg. Novice, Novice, Intermediate, Advanced**

Horse Name \_\_\_\_\_

Rider Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ e-mail Please \_\_\_\_\_

I, the undersigned, hereby release Doubletree Horse Farms/Ebony Equines LLC and their officers, members, agents, employees, representatives, or any of them of and from all claims, demands, action or cause of action of any kind or nature whatsoever, whether now know or ascertained, or which may hereafter develop or accrue in favor of myself, my heirs, representatives or dependents, on account of or by, reason of any injury, loss or damage, which may be suffered by me or them or any of them or to any property, animate or inanimate, belonging to me or used by me, because of any mater, thing or condition, negligence or default whatsoever, and I hereby assume and accept the full risk of danger of any hurt, injury, or damage which may occur through or by any reason or matter, thing or condition, negligence or default, or any person whatsoever. By my signature below I hereby acknowledge that I meet the criteria for eligibility to compete in the classes and clinics entered.

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

If you are under 18 years of age, please have your parent fill out the following:

Agent / Parent I take full responsibility for my child and will act on his or her behalf as I would if I were the participant. I release Doubletree Horse Farms and its agents from any liability concerning any accidents my child may have.

Signature \_\_\_\_\_ Phone \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ ZIP \_\_\_\_\_

Print your name \_\_\_\_\_