Office Use Only



## Kick-Off Schooling Show • March 16 - 17, 2024

MAIL 3801 Hughes Parkway, Paso Robles, CA 93446 • ENTRIES EMAIL office@pasorobleshorsepark.com • ENTRIES CLOSE March 1, 2024

**STALL EMAIL** stalls@pasorobleshorsepark.com •

We strongly recor	mmend comp	leting entries a	at horsesh	owing.com to take advant	age of the <b>NEW</b> digital office benefits.	1		
Horse's Name:			T.I.P. #:		Fees Due With This Entry	PASO ROBLES HORSE PARK LLC & FOUNDATION RELEASE, ASSUMPTION OF RISK, WAIVER, AND INDEMNIFICATION		
Breed: Color:	Age:	Sex: Heig	nt:		Horse Stalls: \$95 x = \$ Tack Stalls: \$95 x = \$	I Agree, in consideration as a competitor, participant, trainer, rider, horse owner or other to the following:     I Agree that I choose to participate voluntarily with my horse, as a rider, driver,		
Owner's Name: Address:					Total Enclosed: \$	handler, caulter, longeur, lessee, owner, agent or as a parent or guardian of a participant/exhibitor under 18 years of age. I am fully aware and acknowledge that horse sports involve inherent dangerous risks of accident, loss, and serious		
City: Phone: ( )	State:	Zip:			To pay by credit card, please fill out the Credit Card Authorization form, located in this prize list and submit with this entry. Otherwise, include a check payable. Credit card and check payments will be	bodily injury including broken bones and head injuries, sickness and disease (including communicable diseases), trauma, pain, suffering or death ("harm").		
Email:  SSN or Fed Tax ID # (for prize money):					deposited on the entry closing date.	I Agree to release the Paso Robles Horse Park LLC and Foundation (Paso Park) from any and all claims for money damages or otherwise for any harm to me or my horse and for any harm caused by me or my horse to others, even if the harm resulted, directly or indirectly, from the negligence of the Paso Park.		
						I Agree to expressly assume all risks of harm to me, or my horse, including harm resulting from the negligence of the Paso Park.		
Trainer's Name:			Barn/Farn	n Name:	Other Possible Fees Due At The Show	I Agree to indemnify the Paso Park, its officers and employees and agents and		
Address:	State:	Zip:	Email:	)	Late Entry Fee <b>\$50</b> (if entry is received after <b>March 1, 2024</b> California Drug Fee <b>\$14</b>	to hold it harmless with respect to claims for harm to me or my horse(s) and for claims made by other for any harm caused by me or my horse(s) during any competition or while at the Paso Park.		
						I Agree that the Paso Park as used herein includes all of its officials, directors, employees, agents, personnel, volunteers, affiliated organizations and vendors.		
Rider 1 Name:			D.1. (D)	rth:/		I Agree that I shall not now or at any time in the future, directly or indirectly,		
Address:			Phone: (		Sections / Classes for Rider 1	prosecute any action, suit or other proceeding against the Paso Park arising out of or relating to actions, causes of action, claims and demands hereby waived,		
City:	State:	Zip:	Email Add	ress:		released or discharged by me, which released claims include all which are known and unknown, foreseen and unforeseen, future or contingent. This release shall be binding upon me and my spouse, legal representatives, heirs, successors and assigns.		
Rider 2 Name: Address:			Date of Bi	rth:/	Sections / Classes for Rider 2	I represent that I have the requisite training, coaching and abilities to safely participate in competition or other events at the Paso Park and to be bound by all of the above terms and other rules and regulations of the Paso Robles		
City:	State:	Zip:	Email:			Horse Park Foundation.  By signing on the line below, I agree to be bound by all applicable rules and regulations of the Paso Robles Horse Park Foundation, including those outlined		
But an						in the full waiver in the Prize List.		
Rider 3 Name: Address:			Phone: (	rth:/	Sections / Classes for Rider 3	Owner Signature:		
City:	State:	Zip:	Email:	1		Rider 1 Signature:		
						Rider 2 Signature:		
Prize Money Payee:		Email:			25. 11. 2.1	Rider 3 Signature:		
Address:				SSN or Fed Tax ID #:	Office Use Only  Entry Postmarked / /	Parent/Adult Guardian Sign & Print Name (if any riders are minors):		
City:	State:	Zip:			Amount Received: \$	Signature:		
Emergency Contact (during	g the show) - Name:			Phone: ( )	Check #: CC Transaction #:	Print Name:		

## **REQUIRED WAIVER & RELEASE FORM**

Please note that every person on the property must have a signed Paso Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, grooms, etc.) with this entry form.



## Paso Robles Horse Park LLC & Foundation Release, Assumption of Risk, Waiver, and Indemnicication

## THIS DOCUMENT WAIVES IMPORTANT LEGAL RIGHTS. READ IT CAREFULLY BEFORE SIGNING.

I Agree, in consideration as a competitor, participant, trainer, rider, horse owner or other to the following:

I Agree that I choose to participate voluntarily with my horse, as a rider, driver, handler, caulter, longeur, lessee, owner, agent or as a parent or guardian of a participant/exhibitor under 18 years of age. I am fully aware and acknowledge that horse sports involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones and head injuries, sickness and disease (including communicable diseases), trauma, pain, suffering or death ("harm").

**I Agree** to release the Paso Robles Horse Park LLC and Foundation (Paso Park) from any and all claims for money damages or otherwise for any harm to me or my horse and for any harm caused by me or my horse to others, even if the harm resulted, directly or indirectly, from the negligence of the Paso Park.

**I Agree** to expressly assume all risks of harm to me, or my horse, including harm resulting from the negligence of the Paso Park.

**I Agree** to indemnify the Paso Park, its officers and employees and agents and to hold it harmless with respect to claims for harm to me or my horse(s) and for claims made by other for any harm caused by me or my horse(s) during any competition or while at the Park.

**I Agree** that the Paso Park as used herein includes all of its officials, directors, employees, agents, personnel, volunteers, affiliated organizations and vendors.

**I Agree** that I shall not now or at any time in the future, directly or indirectly, prosecute any action, suit or other proceeding against the Park arising out of or relating to actions, causes of action, claims and demands hereby waived, released or discharged by me, which released claims include all which are known and unknown, foreseen and unforeseen, future or contingent. This release shall be binding upon me and my spouse, legal representatives, heirs, successors and assigns.

I represent that I have the requisite training, coaching and abilities to safely participate in competition or other events at the Park and to be bound by all of the above terms and other rules and regulations of the Paso Robles Horse Park Foundation.

Participant Name - Print	Participant Signature	Date
Parent/Legal Guardian Name - Print	Parent/Legal Guardian Signature	 Date