COBBLESTONE DRESSAGE SCHOOLING/LOCAL SHOW ENTRY FORM

May 24_	June a	28	October 19	2025
Mail To:	Rose Fountain 33 Woodridge Drive Mendon, NY 14506		Payable to Cobblestone Equestr f current rabies vaccination and negative	

Horse:	Sex:	Age:	Height:	Color:	Breed:
Rider Name: Phone:	Addres: email:	5:			□ Senior / □ Junior (21 and under)

TEST(S) - state level and test letter or number	FEES - \$40 /test

Contact the Organizer: Rose Fountain <u>fountain.rose@gmail.com</u> for more information.

Cobblestone Equestrian Center, 1312 Pittsford Mendon Rd., Mendon, NY 14506

RELEASE OF LIABILITY - PLEASE READ BEFORE SIGNING

It is understood and agreed that as a condition of entry in this competition that the undersigned, each and all, assume any and all risks of injury and loss, release and hold harmless, and indemnify Cobblestone Equestrian Center staff, volunteers and associates, the organizer, the organizing committee, judges, officials, all volunteers, the host and property owners, from legal and financial liability for injury or damage to any horse, rider, family member or spectator. The Release from all legal and financial responsibility is made willingly by the undersigned, from any loss, liability, damage or costs, including court costs and attorney's fees, that may incur due to my participation in said activity, or otherwise, whether or not injury or loss result directly or indirectly from the negligent acts or omissions of Cobblestone Equestrian Center staff, volunteers or associates, the organizer, the organizing committee, judges, officials, all volunteers, the host and property owners. The undersigned does hereby waive, release and forever discharge Cobblestone Equestrian Center its staff, volunteers or associates, the organizer, the organizing committee, judges, officials, all volunteers, the host and property owners. I will agree that I will never prosecute or in any way aid in prosecuting any demand, claim, or suit against Cobblestone Equestrian Center staff, volunteers or associates, the organizer, the organizing committee, judges, officials, all volunteers, the host and property owners for any loss, damage, or injury to my person, persons, horses or property that may occur from any cause whatsoever as a result of taking part of this activity.

RIDER SIGNATURE:	Date	_
PARENT SIGNATURE: (parent or guardian if rider is under 18)	Date	
OWNER OR AGENT SIGNATURE: (adult responsible for entry while on the grounds)	Date	