

JUMP!



ENTRY FORM

Tuesday, July 4, 2017



 PLEASE PRINT CLEARLY AND FILL OUT A SEPARATE ENTRY FORM FOR EACH HORSE 

Name of Horse: _____

Rider's Name: _____

Rider's Date of Birth: _____

Mailing Address: _____

Rider's Phone: _____

Street/P.O. Box

City, State, Zip

Rider's Email: _____

Name of Horse Owner: _____

Owner's Phone: _____

Owner's Address: _____

Owner's Email: _____

Street/P.O. Box

City, State, Zip

Divisions are as follows:

Elementary – no jumps to exceed 18" in height

Baby Novice – jumps up to 2'

Beginner Novice – jumps up to 2' 6"

Novice – jumps up to 2' 11"

Training – jumps up to 3' 3"

Preliminary – jumps up to 3' 7"

All **JUMP!** courses are a combination of stadium-style and cross-country jumps designed to be ridden at appropriate division level speeds.

The day will start with Elementary and move up to Preliminary in order to facilitate riding at multiple levels and allow the option to practice moving up. Riders are encouraged to enter multiple divisions, based on ability. A **lead horse** will be available!

Sharon will be on hand throughout the day to provide **course walks** at the start of each division and discuss best practices for both cross-country and stadium jumping.

Division (check all that apply for <u>this</u> horse)	First Round \$85 each or \$75 if before 6/24/17	Repeat Round \$55 each or \$45 if before 6/24/17	Total Fee each division
<input type="checkbox"/> Elementary	<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> Baby Novice	<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> Beginner Novice	<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> Novice	<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> Training	<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> Preliminary	<input type="checkbox"/>	<input type="checkbox"/>	\$
TOTAL FEES	→		\$
RAFFLE TICKETS	<input type="checkbox"/> 1 for \$10	<input type="checkbox"/> 6 for \$50	<input type="checkbox"/> 15 for \$100 \$
GRAND TOTAL	→		\$



JUMP!

ENTRY FORM (CONTINUED)



Entries will be made on a first-received basis. Space is limited, so enter early.

DISCOUNTED FEES FOR ENTRIES POSTMARKED ON OR BEFORE 6/24/17

JUMP! Rules:

- Riders are required to wear ASTM/SEI approved helmets and cross-country vests, as well as boots or half-chaps, and appropriate riding clothes.
- All riders must participate as individuals and not as part of a team.
- Competitors must bring their own water, as there is limited water on the grounds.
- Competitors may warm up in the indoor arena.
- All rounds are timed and the rider closest to the optimum time with a clear round wins each division.
- First rounds only are scored; repeat rounds, if elected, must be on the same horse in the same division and are not scored.
- A clear round completed in the exact optimum time scores 0 points. Each second that a rider's time deviates, whether faster or slower, from the optimum time adds a point.
- Points will be added for faults as follows:
 - 20 points for refusal of any fence
 - 4 points for a rail or knockdown of any fence
- Riders who spend more than double the optimum time on course may, at the discretion of the organizers or ground jury, be asked to retire.
- There will be a bogey fence for each division, which the rider may choose to jump after the timed round is finished. Successful completion of the bogey fence will adjust the rider's score by 4 points (or less if within 3 points of optimum time) to come closer to optimum time.
- Ribbons awarded for First through Sixth places. Ties stand. Duplicate ribbons will be awarded.
- Negative Coggins required.

Great Raffle Prizes and Silent Auction *including* Horse Trial entries, riding lessons, great stuff from Sharon's sponsors – and MORE!

Orange Spirit Award

given to the individual demonstrating the most team orange spirit!

OTHER INFO:

- EMT on site
- Food and beverages will be offered
- Dogs welcome, but must be leashed
- Rain date is Wednesday, July 5, 2017

**MOST
PATRIOTIC
AWARD!**

PHOTOS

**XC LEAD
HORSE**

If not using electronic entry through bluehorseentries.com, please mail completed entry form, including release(s), check or money order made payable to Last Frontier Farm, and current Coggins certificate

to: Last Frontier Farm
222 Frontier Lane
Summit Point, WV 25446

**** DISCOUNTED FEES FOR ENTRIES POSTMARKED ON OR BEFORE 6/24/17 AND ALL PAPER ENTRIES MUST BE POSTMARKED NO LATER THAN 6/28/17 ****

JUMP!



ENTRY FORM (CONTINUED)



PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK

READ BEFORE SIGNING

In consideration of my voluntary participation in the activities at Last Frontier Farm, including **JUMP!**, I hereby acknowledge and agree that:

- The risk of injury from the activities involved in this program, including but not limited to being in the presence of, mounted on and/or leading a horse, may be significant; this risk includes the potential for permanent paralysis or death.
- I knowingly and freely assume all such risks, both known and unknown, even if those risks arise from the negligence of those persons released from liability below, and I assume full responsibility for my participation.
- I will comply with all rules, regulations, procedures, and practices of Last Frontier Farm and this program.
- I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify, and hold harmless Last Frontier Farm LLC, Sharon White, the owners of the premises of Last Frontier Farm, Last Frontier Farm's officers, trainers, assistants, staff members, judges, employees, agents, invitees, and volunteers with respect to any and all injury, disability, death, or loss of or damage to property, including the horse or horses that I compete at this event, whether such injury, loss, or damage is caused by the negligence of such persons or otherwise.
- I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Participant's signature

Age

Date Signed

Signature of Horse Owner/Agent

Date Signed

FOR PARTICIPANTS UNDER AGE 18 AT TIME OF ENTRY:

This is to certify that I, as parent or guardian with legal responsibility for this participant, have read the contents of the above release of liability and assumption of risk agreement and do consent and agree to his/her release as provided above, and for myself, my heirs, assigns, and next of kin. I hereby release and agree to indemnify and hold harmless Last Frontier Farm LLC, Sharon White, the owners of the premises of Last Frontier Farm, Last Frontier Farm's officers, trainers, assistants, staff members, judges, employees, agents, invitees, and volunteers with respect to any and all liabilities incident to the above participant's involvement in this program, even if arising from the negligence of said persons or otherwise.

Parent/Guardian's Signature

Date Signed



USEA EDUCATIONAL ACTIVITIES AND SCHOOLING SHOWS RELEASE FORM

NAME OF ACTIVITY/SCHOOLING SHOW: _____ USEA AREA: _____

DATE(S) HELD: _____ LOCATION: _____ STATE: _____

I have applied to participate in this USEA sponsored educational activity. I agree that my participation is subject to the Conditions in this release and to those set by the organizer of this activity, the regulations and requirements of the USEA and, where applicable, the **U.S. Equestrian Federation Rules for Eventing**.

I agree to wear protective headgear when riding. When jumping, I agree to wear protective headgear passing or surpassing the ASTM/SEI standards with harness attached that meets standards currently imposed by the **U.S. Equestrian Rules for Eventing**. I understand that the USEA mandates that all riders participating in cross-country activity wear body-protecting vests that meet or exceed current USEF rules and the wearing of an approved medical armband or bracelet.

I understand that the sport of eventing is a high risk sport, and that my participation in this educational activity may also involve participation in an "equine activity" as defined by applicable laws and is solely at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the propensity of equines to behave in ways which may result in injury, harm or even death to humans or other animals around or near them; the unpredictability of equine reaction to sounds, sudden movements, smells and unfamiliar objects; persons or other animals; hazards related to surface and subsurface conditions; collisions with other equines or objects; and, the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participant or others, including failing or inability to maintain control over the animal. By participating in this activity **I agree** to assume responsibility for those risks, and **I release** and agree to hold harmless the activity organizer, organizing committee, officials, the USEA, USEF, their officers, agents, employees and the volunteers assisting in the conduct of this USEA educational activity and the owners of any property on which it is to be held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse(s) which I may ride.

I understand and agree that the organizer of this USEA educational activity has the right to cancel this activity; to refuse any entry or application; to require and enforce the wearing of safety or other attire and the conduct of riders, horses and visitors; and to prohibit, stop or control any action during the activity deemed by the organizer to be improper or unsafe.

THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED IF YOU WISH TO PARTICIPATE IN THIS ACTIVITY.

PARTICIPANT'S NAME (Please Print): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____ EMERGENCY CONTACT PHONE: _____

FAX: _____ EMAIL: _____

TRAINER'S NAME (AT THIS EVENT): _____ PHONE: _____

NUMBER OF HORSES I WILL BE RIDING DURING ACTIVITY (if applicable): _____

Current Riding Level (if applicable):

Beginner Novice Novice Training Preliminary Intermediate Advanced

Check appropriate box:

I am a USEA member and my number is #: _____

I am not a USEA member

I am not a USEA member. I wish to join and have enclosed my membership form and dues.

Check here if participant is under 18 years old.

SIGNATURE: _____ Date: _____

(If participant is under 18, Release must be signed by parent or legal guardian, **not by trainer or instructor**. This release form is valid only when signed personally by the participant. **Signatures of all others, with the exception of a parent or legal guardian of a minor, will not be accepted in the event a claim is filed.**)