



# BRAVE HORSE SHOWS

HOSTED BY

NEW VIEW STABLES

**April 13, 2024 & September 21, 2024**

Entries to: [jane\\_8980@hotmail.com](mailto:jane_8980@hotmail.com)

Entries close: Day of show



For more information contact Jane Ashby @ (587) 437-4022 or Courtney Kremenuik @ (403) 909-5994

Rider Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Email \_\_\_\_\_

AEF # \_\_\_\_\_ Junior ☐ or Amateur ☐ Birthdate of Junior \_\_\_\_\_

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

Trainer Name \_\_\_\_\_ Phone \_\_\_\_\_

Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

Class #									Total
<b>Entry Fee</b> (S18 or S20/class)	\$	\$	\$	\$	\$	\$	\$	\$	\$
<p>I acknowledge that the sport of horses is a high-risk sport and that I am participating at my own risk and in full knowledge of the hazards and potential hazards, which are inherent in this sport. I further acknowledge the inherent risks in riding and working around horses, which risks include bodily injury to both the horse and rider, which can result from normal use, competition or schooling. In consideration of being allowed to participate in this event, I hereby assume all risk and I hereby release and absolve New View Stables Inc., Ashleigh Charity &amp; Cory Walker, the directors, officers, owners, management, employees, volunteers, agents and representatives and the respective personal representatives from all responsibility, liability or claims of any nature and kind which I may have arising from my participation in this activity, including but not limited to bodily injury or death to myself or my horse(s) and damage or loss to property arising from any cause whatsoever, including the negligence of one or more of the individuals and organization referred to herein. I hereby declare that in signing this document, that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon by executors, heirs, and assigns.</p> <p><b>Signing this affects your legal rights.</b>  <b>This entry cannot be accepted without signature.</b>  <b>Trainer signature not valid</b></p> <p>Rider Signature: _____</p> <p>Parent Signature: _____            (If rider is under 18 years of age)</p> <p>Date: _____</p>						Total Entry Fees			
						Office/Admin/Paramedic		<b>\$40.00</b>	
						Post Entry Fee <b>\$25.00</b> (payable if entry received after closing date)			
						SUBTOTAL			
GST 5%									
<b>Entry Fees: S18/class; S20/open class – Please make cheques payable to:            New View Stables or e-transfer to <a href="mailto:newviewchelsea@hotmail.com">newviewchelsea@hotmail.com</a></b>						<b>TOTAL FEES</b>		<b>\$</b>	

The BRAVE Horse Show Circuit respects the privacy of its participants. Participants' information will be used for mailings (email and/or hard copies) of the BRAVE horse show and sanctioned BRAVE horse shows prize lists, entry forms, newsletters to its participants, and other business directly related to the BRAVE Horse Show Circuit. As per the Alberta Personal Information Protection Act – **please initial or mark below if you do not want your name, address, telephone number and e-mail address to be used for these purposes.**    **I DO NOT wish to be on the BRAVE Horse Show Circuit mailing list** x \_\_\_\_\_