

HORSE INFORMATION:	
Name:	
Breed:	
Age:	Mare / Gelding / Stallion
Height:	
Passport#	
Prize Money Recipient:	

TRAINER INFORMATION:	
Name:	
Stable Name:	
Email:	
Total Entry Fee	\$
Office/Administration Fee	\$ 25.00
Paramedic Fee	\$ 20.00
Late Fee (\$30)	\$
Stabling \$53/day Saturday / Sunday	\$
Stabling Overnight: Friday / Saturday	N/C
SUB-TOTAL	\$
GST - 5% of the Above Total	\$
TOTAL	\$

Closing Dates:  
 Carrots & Cocktails Series I - March 3<sup>rd</sup>  
 Carrots & Cocktails Series II - March 31<sup>st</sup>  
 Carrots & Cocktails Series III - April 28<sup>th</sup>



OWNER INFORMATION:	
Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
RMSJ Rewards #:	
Date of Birth:	AEF #:

**WAIVER**

I hereby certify that every horse and rider is eligible as entered and agree for myself and my representatives to be bound by the AEF Rules and Regulations and the Rocky Mountain Show Jumping 2018 Prize List including, without limitation, the Code of Conduct and the Liability clauses. I understand that the AEF divisions of the Rocky Mountain Classics are governed by AEF in which case I accept the rules and regulations of AEF and all the Rocky Mountain Show Jumping Tournaments will be governed by the laws of the land and if there are suspicious incidents, the proper authorities will be called in to handle these situations. I have read and understand the above rules and guidelines as listed above in the 2018 prize list.

\_\_\_\_\_  
 Signature of Owner/Agent

\_\_\_\_\_  
 Signature of Parent/Guardian

\_\_\_\_\_  
 Signature of Rider 1                      Signature of Rider 2

\_\_\_\_\_  
 Signature of Trainer

\_\_\_\_\_  
 Signature of Person Responsible

RIDER ONE INFORMATION:	
Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
Circle: JUNIOR / AMATEUR / OPEN RIDER	
RMSJ Rewards #:	
Date of Birth:	AEF #:

RIDER ONE CLASSES: CHECK SCHEDULE FOR CLASS #'S				

RIDER TWO INFORMATION	
Name:	
Circle: JUNIOR / AMATEUR / OPEN RIDER	
RMSJ Rewards #:	
Date of Birth:	AEF #:

RIDER TWO CLASSES: CHECK SCHEDULE FOR CLASS #'S				

ACCEPTED CREDIT CARDS: VISA / MC	
Card Number:	
Expiry Date:	CSV Code:

Name on Card:

BY SIGNING THIS DOCUMENT, I AUTHORIZE RMSJ TO CHARGE THE ABOVE CREDIT CARD FOR ALL AMOUNTS DUE TO RMSJ WITH RESPECT TO THE ENCLOSED ENTRY(S) AND AMOUNTS CHARGED DURING THE TOURNAMENT.

Signature:

