



HORSE INFORMATION:

Name:	
Breed:	
Age:	Mare / Gelding / Stallion
EC #:	Bronze / Silver / Gold / Platinum
Passport #:	

TRAINER INFORMATION:

Name:	
Stable Name:	
Email:	
Jump Alberta #:	

Office/Admin Fee / Paramedic Fee	\$75.00
Late Fee (\$75) After May 25	\$
Anderson Grand Prix Ring Nomination Fee \$155	\$
Premium Stall 10'x12' Mats \$300 (+\$43.00 wk 1-1st bedding)	\$343
Premium Tack Stall \$300 (+\$43 wk 1 includes 1 st bedding)	
Shavings at \$8.60 per Bag / number of Bags	\$
Hay at \$18 per Bale / number of Bales	\$
Environmental Fee	\$30.00
SUB-TOTAL	\$
GST - 5% of the Above Total	\$
FEI Drug Fee	\$45.00
Jump Canada Levy Fee	\$20.00
TOTAL	\$

OWNER INFORMATION:

Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
EC #:	Gold / Platinum
RMSJ Rewards #:	Jump Alberta #:
Date of Birth:	AEF #:

**FEI PASSES REQUEST INFORMATION
*PLEASE LIST NAMES FOR PROPER ACCREDITATION***

Pass #1 Rider
Pass #2
Pass #3
Pass #4

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 Equestrian Canada 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 Equestrian Canada divisions of the June Classic II are governed by Equestrian Canada and in which case I accept the rules and regulations of Equestrian Canada 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 Person Responsible (Article A1011 Person responsible for the care/custody training and performance of the horse)

RIDER ONE INFORMATION:

Name:	
Address:	
City:	Province:
Postal Code:	Phone #:
Email:	
EC #:	Gold / Platinum
RMSJ Rewards #:	Jump Alberta #:
Date of Birth:	AEF #:

Signature of Owner/Agent

Signature of Parent/Guardian

Signature of Rider

Signature of Trainer

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:

