



RMSJ MID SUMMER CLASSIC I ~ 2010

Closing Date: June 10

HORSE INFORMATION:

OWNER INFORMATION:

RIDER ONE INFORMATION:

Name:
Breed:
Age: Mare / Geld / Stallion
Height: Ponies: SM / MED / LRG 1st YR 2nd YR

Name:
Address:
City: Province:
Postal Code: Phone #:
Email:
EC #: Bronze / Silver / Gold / Platinum
RMSJ Rewards #: CEDL / AHHS #:
Date of Birth:

Name:
Address:
City: Province:
Postal Code: Phone #:
Email:
EC #: Bronze / Silver / Gold / Platinum
RMSJ Rewards #: CEDL / AHHS #:
Date of Birth:

TRAINER INFORMATION:

Name:
Stable Name:
Email:
EC #: Bronze / Silver / Gold / Platinum

Rider One Classes: Check Schedule for Class #'s

Rider Two Classes: Rider Name: _____ Check Schedule for Class #'s

TOTAL ENTRY FEES:	\$
OFFICE/ADMIN FEE:	\$35.00
PARAMEDIC FEE:	\$40.00
LATE FEE (\$75):	\$
JUMPER II RING NOMINATION FEE (\$40):	\$
PERMANENT STABLING \$200	\$
TEMPORARY STABLING \$150	\$
0.70m CEDL Mini Prix Nomination Fee (\$20)	\$
0.90m CEDL Mini Prix Nomination Fee (\$20)	\$
SUB-TOTAL:	\$
GST - 5% of the above total:	\$
EQUINE CANADA DRUG FEE:	\$3.50
C.E.D.L. / AHHS LEVY FEE:	\$7.00
TOTAL	\$

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 Equine Canada Rules and Regulations and the Rocky Mountain Show Jumping 2010 Prize List including, without limitation, the Code of Conduct and the Liability clauses. I understand that the Equine Canada divisions of the Mid Summer Classics are governed by Equine Canada in which case I accept the rules and regulations of Equine Canada and the 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 2010 prize list.

Signature of Person Responsible: _____
(Article A1011 Person responsible for the care/cusody training and performance of the horse)

Signature of Owner/Agent

Signature of Parent/Guardian

Signature of Rider

Signature of Trainer

Credit Card #: _____ ex: _____ / _____

Cardholder Name & Signature: _____



Stable request form must accompany any entries requesting a stall.

Incomplete entry forms will not be accepted. Payment in full must accompany entries.
Fax entries to: (403) 201-7863 or Mail to: Suite 231, 132-250 Shawville Blvd. SE
Calgary, AB T2Y 2Z7

online entries available at: www.rmshowjumping.com
Entries received before the closing date will receive a \$25 discount