



ENTRY NUMBER

WOODLAND STALLION STATION SAHJA HUNTER/JUMPER SHOW

One Horse and Rider/Handler combination per entry form. PRINT LEGIBLY

RIDER NAME		PHONE				EMAIL							
HORSE NAME													
MAILING ADDRESS					CITY			STATE		ZIP			
SAHJA MEMBER YES _____ NO _____					MEMBER #			OWNER					
CLASSES ENTERED					ADDITIONS OR DELETION ALLOWED ONLY WITH AN OPEN CHECK								

FEE SCHEDULE:	SHOW FEES:
\$20/ Class	# of Classes: _____ x \$20 \$ _____
\$40/Specialty Class	# of Specialty Classes: _____ x \$40 \$ _____
\$30/Stall/Horse/Night	SAHJA Fee \$2 \$ <u>2.00</u>
\$8/Per Horse Drug Fee	CDFA DRUG TESTING FEE \$8 \$ <u>8.00</u>
\$20/Office Fee	Stall Fees (call for availability) \$ _____
	Office Fee \$20 \$ <u>20.00</u>
	TOTAL SHOW FEES \$ _____

FOR OFFICE USE ONLY

CLASSES	CLASS # _____	\$ _____	PAID	CLASS # _____	\$ _____	PAID
ADDED	CLASS # _____	\$ _____	PAID	CLASS # _____	\$ _____	PAID
PAYMENT INFORMATION	OTHER _____	\$ _____	OTHER _____	\$ _____		
CHECK NUMBER _____	AMOUNT \$ _____	()	OPEN CHECK			



Woodland Stallion Station Release Form

Name of Rider:

Name of Parent (if rider is a
minor): _____

1. The undersigned Owner/Rider/Student/Parent/Guardian/Trainer and any guests shall abide by all the rules of Woodland Stallion Station. If I do not know the rules, it is my responsibility to find out.
2. The undersigned Owner/Rider/Student/Parent/Guardian/Trainer and any guests shall assume all responsibility and risk arising from engaging or participating in equestrian activities at Woodland Stallion Station. The undersigned Owner/Rider/Student/Parent/Guardian/Trainer and any guests shall hold Next Adventure Ranch, LLC, Woodland Stallion Station, Keila Golden, Daren Robbins, and all WSS staff, employees, and guests harmless from all damages or liability for and injury to person, injury to horse, damage to personal property or for wrongful injury or death caused by negligence.
3. The undersigned Owner/Rider/Student/Parent/Guardian/Trainer and any guests does for him/herself, his/her heirs, executors, administrators, and assigns hereby release, waive, discharge, and relinquish any action or causes of action, aforesaid, which may hereafter arise for him/herself and for his/her estate, and agrees and under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute, present any claim for personal injury, property damage, or wrongful death against Next Adventure Ranch, LLC, Woodland Stallion Station, Keila Golden, Daren Robbins, and all WSS staff, employees, and guests for any of said causes of action, whether the same shall arise by the negligence of any person or otherwise (this mean you will not sue use or any employee, agent, or family member for any reason at any time even if we are negligent).
4. The undersigned will by sign this document promise to indemnify Next Adventure Ranch, LLC, Woodland Stallion Station, Keila Golden, Daren Robbins, and all WSS staff, employees, and guests for any and all damages, verdicts, judgement, expenses, costs and attorney fees for which they may incur in defending themselves against such claims. The underdog even if WSS or its staff or affiliates are negligent.

_____ Rider Initials (Or Parent of Minor Rider)



- 5. The undersigned acknowledges that he/she has read the foregoing paragraphs, has been fully and completely advised of the potential dangers incidental to engaging in equestrian activities and is fully aware of the legal consequences of signing the within instrument.
- 6. Covid-19: I understand that a human virus is in the this community and I am participating with all risk on myself.
- 7. I will take my own temperature prior to coming to Woodland Stallion Station. I will stay home if my temperature is over 99 degrees.
- 8. I will comply with WSS requirement of social distancing, wearing a mask at all times except while mounted, sanitizing my hands often.

Rider Signature

Date

Parent's Signature

Date