



**WOODLAND STALLION STATION
SAHJA HUNTER/JUMPER SHOW**

ENTRY NUMBER

April 16 • May 28 • June 18 • July 2 • Aug 6 • Sept 10

One Horse and Rider/Handler combination per entry form. Circle correct show date above. **PRINT LEGIBLY**

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

Entries MUST be received no later than 5 days before the show date or be charged. NO day of show entries.

FEE SCHEDULE: \$20/ Class \$40/Specialty Class \$35/Stall/Horse/Night \$8/Per Horse Drug Fee \$25/Office Fee \$20/ Late Fee	SHOW FEES: # of Classes: _____ x \$20 # of Specialty Classes: _____ x \$40 SAHJA Fee \$2 CDFA DRUG TESTING FEE \$8 Stall Fees (call for availability) Office Fee \$25 Late Fee \$20 if entry is received less than 5 days before show date	\$ _____ \$ _____ \$ 2.00 \$ 8.00 \$ _____ \$ 25.00 \$ _____ TOTAL SHOW FEES \$ _____ \$ _____
FOR OFFICE USE ONLY		

DATE ENTRY RECEIVED: _____	Late Entry? YES / NO	Release Form Signed? YES / NO
CLASSES CLASS # _____ \$ _____ PAID CLASS # _____ \$ _____ PAID		
ADDED CLASS # _____ \$ _____ PAID CLASS # _____ \$ _____ PAID		
PAYMENT INFORMATION OTHER _____ \$ _____ OTHER _____ \$ _____		
CHECK NUMBER _____ AMOUNT \$ _____ () OPEN CHECK		

Woodland Stallion Station Release Form 2022

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 undern o 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 many incur in defending themselves against such claims. The underdog even if WSS or its staff or affiliates are negligent.
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. * _____ *Rider Initials (Or Parent of Minor Rider)*
6. Covid-19: I understand that a human virus is in 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, sanitizing my hands often and wearing a mask at all times except while mounted if required by management. Signs will be posted at office if masks are required.

Rider Signature

Date

Parent's Signature

Date