FAIR HAVEN FARMS JUMPER ENTRY

COGGINS____VACS____

RIDER:	Entry#:	Entry#:		
ADDRESS:	PHONE#:			
HORSE NAME:	OWNER:			
ADDRESS:	EMAIL			
TRAINER:	EMAIL PHONE #:	PHONE #:		
Class #'s Fence ht	Pre Post Entries @ \$18 Entries @ \$20			
	Mini Prix @ \$40@ \$45			
	\$75 weekend \$65 overnight stall \$50 day sta	II		
	Bedding \$10 / bag bags	6		
	EMS fee \$10	10.00		
	Grounds Fee \$20	20.00		
	Day Shipper \$20			
	TOTAL Amount Due			
	Check #			
	Cash			

The undersigned assumes the risk of equine activities pursuant to Pennsylvania Law. THE EQUINE IMMUNITY ACT, ACT 93 OR 2005. Unavoidable risks inherent in all horse related activities include but are not limited to bodily injury and physical harm to horse, rider, and spectator. In consideration, therefore for the privilege of riding, showing and/or working around the undersigned does hereby agree to hold harmless and indemnify MICHAEL and KAREN MULLIN, FAIR HAVEN FARMS LLC, and all employees and contractors and further releases them from any liability or responsibility for accident damage, injury, death or illness to the undersigned or to any horse owned by the undersigned or to any family member, trainer or spectator accompanying the undersigned. The undersigned does hereby covenant and pledge not to sue MICHAEL and KAREN MULLIN, FAIR HAVEN FARMS LLC, employees, volunteers and contractors for, or in connection with any claim or cause of action which may arise. The undersigned warrants and represents that the rider/student maintains in force general medical insurance coverage in sufficient amounts for this or similar purposes.

Date:

Rider Signature			
	Date:		
Parent/Guardian Signature (if rider under 18)			
CREDIT CARD #		_Expires	Code
YOUR EMAIL			
MAIL CHECKS or CREDIT CARD # WITH COMPL	ETED ENTRY TO	:	
Fair Haven Farms LLC	412-848-3501		
206 Lee Rd Grove City, Pa 16127	www.fairhavenfai	rms.net	

NOTE: Pre-entries/stall fees MUST be received by the Monday prior to the show date