

WINDSOR ESSEX CADORA  
2019 Dressage SCHOOLING Competition Entry  
Cheques Payable to: Windsor Essex Cadora  
Please use 1 Entry form per horse/rider/show

Circle Date of Competition:	June 9	July 7	July 28	Aug. 18	Sept. 15
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ENTRIES WILL BE ACCEPTED AT GREENHAWK

RIDER	OWNER	HORSE
<b>Status (Circle):</b> Junior    Open	<b>Please have Owner fill out:</b>	
Name:	Name:	Show Name
Address:	Address:	Jockey Club Name (if Appl.)
City:	City:	
Phone:	Phone:	TIP Number (if Applicable)
Email:	Email:	
EC Number: (Optional)	EC Number: (Optional)	
OE Number: (Optional)	OE Number or Proof of Insurance:	
Date of Birth (Junior):	Coach:	

PLEASE USE PRIZELIST for ENTRY as a \$10.00 Fee will be Charged for any ERRORS

Class# (use prize list)	Class Description (Please use Prize list to fill out)	\$25.00 Per Class
Subtotal of Class Fees		
<div style="border: 1px solid black; padding: 5px; width: fit-content;">           Mail Entries To:            Mayr McCarthy            2070 Batten Side Road            Essex, Ontario N8M 2X6  <a href="mailto:mayrmc@hotmail.com">mayrmc@hotmail.com</a> </div>		Admin. & Number Fee
		NON Member Fee (\$15)
		Errors Fee
		LATE FEE
		<b>TOTAL</b>
<b>NOTE: \$ 5.00 REFUNDED WHEN RIDER'S NUMBER IS RETURNED</b>		

"I hereby certify that every horse and/or rider is eligible as entered and agree for myself and my representatives to be bound by the Constitution and Rules of Equestrian Canada at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless EC, the competition, their officials, organizers, agents, employees, volunteers and their representatives. The person responsible (PR) agrees to the release of any information on the entry form to EC." -(as per article A802.6) In the event that

**(Name):** \_\_\_\_\_

participates in an Equestrian Canada sanctioned competition where protective headgear is required for juniors, he/she will wear properly fitted and fastened approved headgear at all times while riding at the event location. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions."- as per article A802.6) See rules of EC A905 Headgear. I hereby give permission for the names and/or pictures of the above rider and mount to be used by WE CADORA in their newsletter, website and/or publications. I have read and will comply with the competition regulations listed. Waiver and release: Except in the event of gross and wilful negligence. I/we the undersigned shall bring no claims, demands, actions and causes of actions, and /or litigation, against the WE CADORA committee, its member or agents or the property owners for any economic and non-economic losses due to bodily injury, death, or property damage sustained by me in relation to my service as a volunteer for or participant in WE CADORA event, including while I/we am near horses in the care, custody and control of the WE CADORA Committee or its agents or the property owners. I/we understand that equine activities are risky by their very nature and agree to undertake full responsibility for said risk on my/our behalf and on the behalf of my/our minor child(ren), legal wards, heirs, representatives and assigns. I/we also agree to release the WE CADORA Committee from any and all liability. I further understand as follows: This release and waiver shall remain in effect for all claims arising under its terms for the entire duration of my/our participation in the WE CADORA Event, regardless of my level of participation in that event. I also agree that if any partition of this release and waiver is struck down by a court of law, the remaining terms shall remain binding. MY/OUR SIGNATURE BELOW IS PROFF THAT I HAVE READ THIS "PERMISSION TO PARTICIPATE" AND READ THE "WAIVER AND RELEASE".  
I UNDERSTAND THAT I AM WAIVING CERTAIN LEGAL RIGHT AND KNOWINGLY AND VOLUNTARILY AGREE TO DO SO.

_____ Signature of Rider (Parent If Under 18 years)	_____ Signature of Owner (Parent If Under 18 Years)	
_____ Signature of Person Responsible (PR)	_____ EC# of PR	_____ Print Name of Person Responsible