



Equestrians Institute Everything But The Kitchen Sink Driving Event

Combined Driving Schooling/Derby/Dressage Festival/Lessons/Driving Trial

When: June 29, 30, July 1, 2018

Where: Ethel Events Center, Ethel, WA

| | | |
|-------------------|--|-------------------|
| Driver: | Medical armbands or Road ID are required for all participants. Questions? Call Sarah 206-949-0979 or Diana 425-466-4845 | Horse Owner: |
| Address: | | City, State, Zip: |
| City, State, Zip: | | Navigator: |
| E-mail: | | E-mail: |
| Phone: | | Phone: |

| | | | | | | |
|---|---|--|---------------|------------|--------------|--------------|
| Class: (Circle) Horse Pony Small Pony VSE | Turnout: (Circle) Single Pair Multiple (Tandem, Unicorn, Four) | Division: (Circle) Training Prelim Intermediate Advanced | | | | |
| Approx. arrival time: | Equine Name | Age | Height | Sex | Color | Breed |
| Please stable near: | | | | | | |
| Special considerations: | | | | | | |
| Truck + trailer length: | | | | | | |

Mail entries to: Leslie McGinnis
32917 NE 134th St.
Duvall, WA 98019

Email: leslie@einw.org
Phone: 425-770-1145

Make checks payable to:
Equestrians Institute

Donation \$ _____
EI is a 501(c)(3) Non-Profit organization

Total from details page 2 \$ _____

Total: (Donation + Fees) \$ _____

Golf Cart (separate check please) \$ _____

** Join EI today and get the EI member discount.
To join, go to our website at www.einw.org and select "Join EI"

Special Considerations: (such as dietary or medical restrictions, sharing equipment or navigator, etc.)



Details Page 2

Combined Driving Schooling/Derby/Dressage Festival/Lessons/Driving Trial

When: June 29, 30, July 1, 2018

Where: Ethel Events Center, Ethel, WA

Driver: _____ Navigator: _____

Stalls

- One initial bag of shavings per stall is included.
- No stall deposit. Final stall cleaning included.

Stall Fees: (per stall)

Weekend \$95 x # of stalls _____ = \$ _____

Two nights only \$70 x # of stalls _____ = \$ _____

One night only \$45 x # of stalls _____ = \$ _____

OR

Haul-in (no stall) \$25 \$ _____

Golf Cart

Limited number available. Not guaranteed.
Separate check for golf cart please.

Two person golf cart \$155 \$ _____

Four person golf cart \$235 \$ _____

(Please copy golf cart fee to front sheet)

Continued On Right Side Of Page >>>>>>

Medical armbands or Road ID are required for all participants.

Questions? Call Sarah 206-949-0979 or Diana 425-466-4845

Make checks payable to:

Equestrians Institute

** Join EI today and get the EI member discount.

To join, go to our website at www.einw.org and select "Join EI"

ENTRY CHECKLIST – Incomplete entries will go on the waiting list until the entry is completed:

- 1) Are all appropriate lines and boxes filled in?
- 2) Waiver signed?
- 3) Is your signed check made out to "Equestrians Institute"?
- 4) Have you included a separate check for a golf cart?
- 5) Have you included vaccination/vet paperwork?

Brought forward from Details Page 1:

Basic day use fee: (*Mandatory*) \$ _____

Derby fee: (*Optional*) \$ _____

Stacey Giere Lesson: (*Optional*) \$ _____

Dressage Festival fee: (*Optional*) \$ _____

Driving Trial fee: (*Optional*) \$ _____

Stall or Haul-in Fees: (*Mandatory*) \$ _____

Medical armband(s) (\$10 each) \$ _____

TOTAL FEES: \$ _____

(Please transfer total fees to front sheet)



Equestrians Institute Driving Liability Waiver/Hold Harmless Agreement

Assumption of Risk, Waiver and Indemnification This document waives important legal rights. Read it carefully before signing. I AGREE in consideration for my participation in this Equestrians' Institute Competition to the following: **I AGREE that “Competition” as used herein includes the Licensee and Competition Management, Equestrians Institute as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and property owners.**

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. (“Harm”). I AGREE to **hold harmless** and release the Competition as well as from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of **any nature** caused by me or my horse to others, even if the Harm arises or results resulted, directly or indirectly, from the negligence of the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse **while** at the Competition. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I AGREE that the “Competition” as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. I represent that I have the requisite training, coaching and abilities to safely compete in this competition. **BY SIGNING BELOW, I AGREE** to be bound by all applicable rules and all terms and provisions of this entry blank.

| | | |
|--|---|-------------|
| Participant Name (Please Print) | Signature (Parent/Guardian if under 18 years of age) | Date |
|--|---|-------------|

| | | | |
|--------------------------------------|---|---------------|-------------|
| Navigator Name (Please Print) | Signature (Parent/Guardian if under 18 years of age) | E-mail | Date |
|--------------------------------------|---|---------------|-------------|

| | | | |
|--------------------------------------|---|---------------|-------------|
| Navigator Name (Please Print) | Signature (Parent/Guardian if under 18 years of age) | E-mail | Date |
|--------------------------------------|---|---------------|-------------|

| | | | |
|--------------------------------------|---|---------------|-------------|
| Navigator Name (Please Print) | Signature (Parent/Guardian if under 18 years of age) | E-mail | Date |
|--------------------------------------|---|---------------|-------------|