

The Sherwood Forest Equestrian Center



Combined Test Entry Form

March 28, 2009



Owner / **R**ider's Name: _____ **H**orse's Name _____

Address _____

City _____ **S**tate _____ **Z**ip _____

Phone _____

Email _____

Division: Trot-a-Trail Training
 Beg. Novice Prelim
 Novice

Entry Fee \$30 per class: _____ \$15 per schooling rounds _____

Checks payable to: **PRH** **S**end to The Sherwood Forest at the address below

Release

I realize that there is inherent danger in participating in any horse related activity. As such I hereby release and hold harmless The Sherwood Forest Equestrian Center, Inc. (Sherwood Forest), its owners, principals, officers, agents, employees, trainers, organizers and volunteers from all liability and waive any claim for damage from any cause whatsoever. This agreement is made pursuant to, and in conjunction with the Oregon Equine Activity Statutes, ORS 30.687 to 30.697.

I further assume full responsibility for myself, guests and minor children for which I am a parent, guardian or otherwise responsible, for all activities on the grounds at The Sherwood Forest. I have read and understand the foregoing release.

Signature _____ Date _____

If under 18 years of age, your parent or guardian must sign. _____



The Sherwood Forest Equestrian Center, Inc.

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www.sherwoodforestec.com