

Sharon Camarillo Western Classic Entry Form 2011

Complete both sides of this form for each horse entered.

DATE _____

BILLING/RELEASOR INFORMATION Releasor is defined in on the back of this form.

<p>GENERAL MANAGER Debbie Wood Sharon Camarillo Classic</p> <p>ADDRESS 950 Karen Drive Chico, CA 95926</p> <p>Phone (530) 895-1852 Fax (866) 334-4178 Email sharoncamarilloclassic@gmail.com</p>
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Name _____

Address _____

City _____ State _____ Zip _____

Phone with Area Code _____

Cell Phone with Area Code _____

Email _____

REMITTANCE OF PAYMENT

Payment by Check
Payment by Credit Card

Make Checks payable to Sharon Camarillo Classic.

A 5% credit card processing fee will be added to payments made by credit card

IF PAYMENT BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING

Visa Master Card AMX

Number _____

Expiration (MM/YY) _____ Security Code _____

The security code is the 3-digit number on the back of the card, or if AMX, this is the 4-digit number on the front.

Your Name exactly as it appears on the card _____

DISTRIBUTION OF PAYMENT		FEE	PAID NOW	TO BE PAID BY JUNE 25
Entry Fees	Per Horse Entry, includes one Riders Reception Ticket	\$350	\$ _____	\$ _____
	Deposit, non-refundable, if not paying the full fee now	\$100	\$ _____	\$ _____
	Appreciation Barrel Race, rider must have competed in six previous Classics	\$25	\$ _____	\$ _____
	Target Barrel Race, open to all riders	\$25	\$ _____	\$ _____
	Junior Rider Barrel Race, rider must be 18 years old or under	\$25	\$ _____	\$ _____
	Senior Rider Barrel Race, rider must be 50 years old or over	\$25	\$ _____	\$ _____
	Additional Riders Reception Tickets Qty _____ @ \$25/each	\$ _____	\$ _____	\$ _____
	Late Fee, non-refundable, if applicable	\$50	\$ _____	\$ _____
Stall Fees	Three-night minimum, includes one bag of savings	\$75	\$ _____	\$ _____
	Additional nights @ \$20/each Qty _____	\$ _____	\$ _____	\$ _____
	Bags of shavings @ \$8/each Qty _____	\$ _____	\$ _____	\$ _____
	TOTAL		\$ _____	\$ _____

Arrival Date _____ **Arrival Time** _____

Stalling Buddy Nam(s) _____

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Complete both sides of this form for each horse entered.

Rider's Name _____ Age _____

Where will you be staying during the Classic? _____

Year of last Sharon Camarillo Clinic attended _____

Have you ridden in a Sharon Camarillo Classic before? Yes No If yes, number of years? _____

Horse's Name _____ Color _____ Age _____ Mare Gelding

Although not required, in order that we better know you, please complete the following:

Occupation _____

Years barrel racing _____ Other Events/Titles/Awards _____

TERMS

1. A separate Entry form must be completed for each horse. No more than two horses per rider may be entered.
2. **The rider must be a Sharon Camarillo Performance Horsemanship Clinic graduate, any year. The rider must be eligible to compete in specific races as stipulated in the distribution of payment.**
3. Entries with no late fees must be received by June 25, 2011. A late fee is charged if entering after June 25 to July 17, 2011.
4. No entries will be accepted after July 17, 2011.
5. Deposit and late fees are non-refundable. July 17, 2011 and thereafter, all moneys paid are non-refundable, with the exception of stall fees which are refundable only with 48 hours prior notice.
6. Payment must be received by the General Manager by check or credit card on the dates stipulated. The General Manager must also receive this Entry form.
7. The Classic is limited to 200 entries.

ADDITIONAL STALL TERMS

1. The three-night minimum stall fee includes one bag of shavings. Additional bags of shavings may be pre-ordered on this Entry form for \$8/each or are available for purchase onsite at a higher rate.
2. All horses left on the grounds overnight must be stalled.
3. No day stalls are available.
4. Stalls will be locked and not opened until 7 am on the day of your paid arrival. Gates may be closed at 11 pm on Thursday night. If your arrival time does not coincide with the above times, the General Manager must be notified.

RELEASE OF LIABILITY

On consideration of Releasor or his/her/their minor child, or their equine, being permitted to engage in an equine activity as defined herein, where Sharon Camarillo, Debbie Wood, and all of Sharon Camarillo sponsors, agents, volunteers, employees, associates, officers, servants or assigns (hereinafter collectively called "Releasee") are the equine activity sponsors and or professionals, Releasor, for himself/herself/themselves, and his/her/their and their minor child's heirs, executors, personal representatives, agents and assigns and theirs and their minor child's next of kin, and all other persons, partnerships, corporations, subsidiaries, parents, affiliates of any kind whatsoever, hereby releases, waives, discharges and covenants not to sue or prosecute or present any claim against Releasee, for personal injury, bodily injury, death or wrongful death, damage, or loss, to or of Releasor, or property damage to any property of Releasor, whether caused by the negligence of Releasee or otherwise while the Releasor is engaged in any equine activity wherein Releasee is the equine activity sponsor and/or equine professional.

Releasor assumes full responsibility on his or her own behalf and his or her minor child's behalf for and risk of bodily injury, death or property damage due to negligence of Releasee or otherwise while engaged in any equine activity where in Releasee is the equine activity sponsor and/or equine professional.

Releasor agrees to indemnify and hold Releasee harmless from any loss, liability, damage or cost Releasor may incur while engaged in any equine activity wherein Releasee is the equine activity sponsor and/or equine professional.

Releasor agrees that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Nevada and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Releasor, being of lawful age, does for himself/herself/themselves, and/or his/her/their minor child, his/her/their heirs, executors, administrators and assigns, hereby release and forever discharge Releasee, from any and every claim, demand, action or right of action, of what so ever kind of nature, either in law or in equity arising from or by reason of bodily injury or personal injuries known or unknown, death and/or property damage resulting or to result from any accident which may occur while engaged in any equine activity where in Releasee is the equine activity sponsor and/or equine professional.

Releasor further states that he/she has carefully read the above release and knows the contents of the release and signs this release as his/her own free act.

This release contains the entire agreement between the parties to this agreement and the terms of this release are contractual and not a mere recital.

This release is intended to be a legal document. Releasor should consult an attorney before signing this document.

"Equine activity" for purposes of this release agreement includes equine activity as that term is or may be defined under the laws of the State, and shall also include and not be limited to participation in the Sharon Camarillo Performance Horsemanship Clinic/Classic Programs, riding, training, exercising, stabling, stalling, practice riding, and racing of equine/horses, and all attendant and associate/related activities and events.

Releasor Name Printed _____

Releasor Signature/Agreement _____

Emergency Contact Name _____ Phone _____

Relationship _____