GOOD FELLOWSHIP RIDING CLUB FRIDAY NIGHT FUN SHOWS		ntry #: ate:
FRIDAY, MAY 26, JUNE 23, AUGUST 25 & SEPTEMBER 29, 2023 7:00p.m.		te:
Riders Name		
Address:		
City, State, Zip Telephone		Email address:
Riders Age: (17 & under as of 1/1/23) Horse/Pony Name DOB (for 17 & under)		
	***CIRCLE THE CLA	SSES YOU WANT TO ENTEI
	Number of classes entered DAY OF SHO	Wx \$7.00 OR
1 LEADLINE		
2 WALK/JOG/TROT (12 YRS & UNDER)		
3 OPEN WALK/JOG/TROT		
4 WESTERN/ENGLISH PLEASURE (12 YRS & UNDER)		
5 OPEN WESTERN/ENGLISH PLEASURE		
6 OPEN EGG & SPOON		
7 OPEN MUSICAL RIBBON		
8 OPEN KEYHOLE		
9 POLE BENDING		
10 OPEN SPEED BARRELS		
11 OPEN BARRELS		
12 OPEN ROOSTER PICKUP		
13 OPEN CRAWL THROUGH THE BARREL		

14 OPEN 50 YARD DASH

The Good Fellowship Riding Club Show Release Form

A NEGATIVE COGGINS WILL BE REQUIRED AT EVERY SHOW NO COGGINS – NO SHOW

The Good Fellowship Riding Club, its owners, and its agents will not be responsible for any accidents; property damage, loss or theft incurred on the show grounds. The Exhibitor shall hold Good Fellowship Riding Club harmless and indemnify them against any legal proceedings arising from any accident or damages. Your signature on this form will release the Good Fellowship Riding Club and its owners of all said responsibilities.

I, the undersigned (owner and rider - if different, parent/guardian - if owner or rider is 17 years of age or under) knowingly and voluntarily agree:

- To assume total legal responsibility and hold harmless the Good Fellowship Riding Club, its owners; its agents and show management for any bodily injury or property damage sustained by me and/or my horse, equipment or rider on the showground or in the show ring.
- To release the Good Fellowship Riding Club, its owners, its agents and show
 management of any legal responsibilities and to hold harmless the aforementioned
 for any bodily injury or property damage sustained by me/or my horse, equipment,
 or rider on Good Fellowship property.

ALL RIDERS MUST WEAR A SHOE WITH A HEEL.

Riders 17 years and under, as of 1/1/18, must wear an approved helmet while mounted on the club grounds.

By signing this form, I agree to abide by all the Rules and Regulations set forth by the Good Fellowship Riding Club.

Signature of Rider (18 & over)	Date	
Signature of Parent/Guardian if 17 and under	Date	Matagraphic Matagraphic Annie An
Horse owner	Date	