



____ Member

____ Non Member

SCHOOLING SHOW VIRTUAL ENTRY FORM

EXHIBITOR NAME:	HORSES NAME:
ADDRESS:	
EMAIL:	
PHONE #:	DATE OF BIRTH (IF YOUTH):

check one **SENIOR** 19 & over
 INTERMEDIATE 14-18 years
 JUNIOR 11-13 years
 PEE WEE 10 yrs & under
 WALK/TROT

PLEASE CIRCLE CLASS NUMBER(S) YOU WISH TO RIDE IN *please check facebook for classes offered

1 2 3 4 5 6 7 8

CLASS FEE # _____ classes x \$10.00 PERCLASS	\$
JUDGE CONSULTATION – ADD \$10.00 (personal critique, if offered)	\$
TOTAL DUE e-transfer to AERCcanada@gmail.com use password: AERC2021	\$

- A separate entry is required for **EACH** show, for each horse/exhibitor combination
- All videos must be time and date stamped within the show dates

I hereby certify that the exhibitor and horse named above is eligible to enter this Armstrong Enderby Riding Club schooling show. I further certify that I understand and agree to abide by the rules and regulations of Armstrong Enderby Riding Club. I recognize that equestrian activities may be dangerous and involves certain inherent risks, including but no limited to the risks of possible serious injury or death. I agree to make no claim whatsoever against the Armstrong Enderby Riding Club, its officers and/or directors or any agent, official or member of the Armstrong Enderby Riding Club for any accident, injury or loss that may occur to, or be caused by, any horse at/during the show; or should any article of any kind or nature be lost or destroyed or in any way damaged. I grant to Armstrong Enderby Riding Club the right to take photographs of me and my family in connection with this event. I also agree that Armstrong Enderby Riding Club may use photographs of me or my ward(s) with or without my name and for any lawful purpose including, for example, such purposes as publicity, illustration, advertising and web content.

Date: _____ **Signature of Exhibitor** _____
(Parent or guardian must sign for youth)

Print Name if different from Exhibitor name above _____

Email to AERCcanada@gmail.com