

**Make Checks Payable to: Clear View Farm**  
**Please print all information legibly – Thank you**

**Clear View Farm Just For Fun Show**

**Only One Horse/Rider Per Entry Form**

Horse Name	Owner Name	Rider Name	Rider DoB (Jrs. Only)	Class Numbers Entered

X \_\_\_\_\_  
 Owner Signature

X \_\_\_\_\_  
 Rider Signature – (Parent/Guardian if Minor)

X \_\_\_\_\_  
 Trainer Signature

\_\_\_\_\_  
 Owner Address Line 1

\_\_\_\_\_  
 Rider Address Line 1

\_\_\_\_\_  
 Trainer Printed Name

\_\_\_\_\_  
 Owner Address Line 2

\_\_\_\_\_  
 Rider Address Line 2

\_\_\_\_\_  
 Trainer Address Line 1

\_\_\_\_\_  
 Phone (Home)                      (Cell)

\_\_\_\_\_  
 Phone (Home)                      (Cell)

\_\_\_\_\_  
 Trainer Address Line 2

\_\_\_\_\_  
 Owner Email

\_\_\_\_\_  
 Rider Email

\_\_\_\_\_  
 Phone (Home)                      (Cell)

\_\_\_\_\_  
 Trainer Email

Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976. I agree that Clear View Farm, the owners of the facilities, their officials and employees will not be held responsible for any accident or loss which may occur to an exhibitor, spectator, guest, rider, trainer, groom, attendant, or other employee, animal or equipment at any show(s) listed in this prize list or conducted at this facility. I further agree to repay Clear View Farm and the owners of the facility, on demand all damages it may sustain by reason of any claim or demand.

Entries not signed will not be accepted. Signatures required in three places. Signature indicates that each has read, understands and agrees to the above.

	Office Use Only
Office Fee	\$20.00
Class Fees (\$15 each)	_____
Other Fees	_____
Total Due	_____
Check Number	_____