

# ENTRY FORM

Back# \_\_\_\_\_

## TOP Hand Ranch Horse Event to Benefit Teens Opposing Poverty, Inc.

Miran Farm • 21500 Miran Farm Lane • Aldie, VA 20105

Horse's Name: \_\_\_\_\_ AQHA# \_\_\_\_\_ Foal Year \_\_\_\_\_

Circle One: Stallion Mare Gelding

\*\*\*Required Copy of CURRENT COGGINS Coggins Date: \_\_\_/\_\_\_/\_\_\_ Accession#: \_\_\_\_\_

Owner's Name \_\_\_\_\_ AQHA # \_\_\_\_\_ Expires: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Rider #1 Name \_\_\_\_\_ AQHA # \_\_\_\_\_ Expires: \_\_\_\_\_

Date of Birth: (Youth or Select) \_\_\_/\_\_\_/\_\_\_ Relationship to Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Rider #2 Name \_\_\_\_\_ AQHA # \_\_\_\_\_ Expires: \_\_\_\_\_

Date of Birth: (Youth or Select) \_\_\_/\_\_\_/\_\_\_ Relationship to Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Class#	Exhibitor#	Class Name	Sat	Sun	Class#	Exhibitor#	Class Name	Sat	Sun
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

### RELEASE OF LIABILITY

I FULLY ACKNOWLEDGE AND UNDERSTAND that horseback riding is an athletic event that poses potentially serious risks of injuries or Death to its participants and that my horse or I may be injured or die as a result of my negligence, the negligence of others, or through the fault of myself or anyone else, because of the nature of the activity in which I am going to be engaged and that horses, even the best trained, are often unpredictable. With this waiver I accept notice of the provisions of Section § 3.2-6200 through § 3.2-6203 (as amended) of the Code of Virginia, which States in part: "Intrinsic dangers of equine activities" means those dangers or conditions that are an integral part of equine activities, including: (i) the propensity of equines to behave in ways that may result in injury, harm, or death to persons on or around them; (ii) the unpredictability of an equine's reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals; (iii) certain hazards such as surface and subsurface conditions; (iv) collisions with other animals or objects; and (v) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant's ability. The waiver shall remain valid unless expressly revoked by the undersigned or parent or guardian of a minor, in writing, with receipt acknowledged by Teens Opposing Poverty, Inc. and its officers.

I FULLY ACKNOWLEDGE AND UNDERSTAND that I am completely responsible and assume all risks for anything that happens to me and/or my horse while engaged in any equine activity operated, sponsored or supported by the Teens Opposing Poverty, Inc. (the "Equine Activity Sponsor") on/at the Equine Activity Sponsor's facility or event. For the sole consideration of participating in any activity of the Teens Opposing Poverty, Inc., the undersigned hereby releases and forever discharges the Teens Opposing Poverty, Inc., its officers and directors and landowners (Miran Farm) upon whose property an accident or loss may occur, their heirs, successors, executors, administrators, agents, and assigns, and all other persons, firms or corporations liable or who might be claimed to be liable, none of whom admit any liability, but all expressly deny any liability from any and all claims, demands, damages, actions, causes of actions or suits of any kind or nature whatsoever. Teens Opposing Poverty, Inc. and its directors, officers, and volunteers are in no way responsible for any injuries, damages or losses that may occur.

I HAVE READ AND UNDERSTAND THE ABOVE LIABILITY RELEASE

\_\_\_\_\_  
Rider's Signature

\_\_\_\_\_  
Parent/Guardian's Signature (for riders under 18 years of age)

\_\_\_\_\_  
Date