



Pumpkins and Ponies Playday

SAT OCT 17TH 2009

Sign up - 9:00 AM Show starts 10:00 AM

Entry Form

Rider's Name: _____ Therapeutic Riding Program Name: _____

Rider's Address: _____

Phone Number: _____ Email: _____

Horses Name: _____ Fees (\$25 for all Therapeutic Classes,
\$ 5 for each Costume class -
Add \$ 2 per class post entry fee if entered after Oct 7th)

<u>Class #:</u>	<u>Class Name:</u>	<u>Fee:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Post Entry Fees - _____

Total Fees - _____

Make checks payable to: **Saddle Pals Grass Valley**
[501(c) 3 #94-1507998]

Mail to: Saddle Pals c/o Joanie Salyer
20694 Wildwood West Dr
Penn Valley, CA 95946

Entries close October 7th

Release: The undersigned assumes the unavoidable risks inherent in all horse related activities, including, but not limited to bodily injury and physical harm to horse, rider, competitor and spectator. In consideration, therefore, for the privilege of riding and/or working around horses at UCP/Saddle Pals Grass Valley and Blue Fountain Farm, the undersigned does hereby agree to hold harmless and indemnify UCP/Saddle Pals Grass Valley and Blue Fountain Farm, and further release them from any liability or responsibility for accident, damage, injury or illness to the undersigned or to any family member or spectator accompanying the undersigned.

Signature of adult participant: _____

Signature of parent/guardian of jr rider: _____

Date: _____

Saddle Pals - Grass Valley is proud to be a part of UCP Greater Sacramento