



Sumter County 4-H Horse Show Registration Form



Rider's Name (First & Last): _____

Date of Birth: _____ (circle one) JR INT SR ADULT

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Cell) _____

E-Mail: _____

Horse's Name: _____ Horse's Owner: _____

(Must complete a separate entry form for **each** horse) (Horse's Owner must match owner on Coggins record)

State law requires proof of negative Coggins test to be shown. Please provide a copy of Coggins with registration form.

Write all class numbers in boxes below:

Youth May Only Enter 6 Payout Classes. One of the 6 Classes must be a Showmanship or Ground Handling Class

(Make sure that you enter all W/T or all W/T/C classes, not both!!! W/T youth may enter Halter classes)

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Show Class	\$10.00/class x _____ classes	\$ _____
Stall Fee (<i>Mandatory</i>)	\$25.00	\$ _____
Cattle Fee	\$20.00/run x _____ runs	\$ _____
Late Fee	\$20.00	\$ _____
TOTAL FEES		\$ _____

Equine Activity Sponsor Release

Know all men by these presents, that participant named above, who resides at see above, (hereinafter referred to as "Participant"), desires to engage in and does hereby engage in the following equine activity, to wit: **SUMTER COUNTY 4-H HORSE PROGRAM ACTIVITY LOCATED AT SUMTER EQUESTRIAN CENTER, INC. BUSHNELL, FL.**

For and in consideration of the above activities, services, and entry fees paid, receipt and sufficiency of which is hereby acknowledged, Participant hereby does forever and finally release, remise, acquit, satisfy and forever discharge the Equine Activity Sponsor of and from all manner of action and actions, cause and causes of action, suit, debts, dues, sums of money, bonds, billings, contracts, controversies, agreements, promises, damages, variances, judgments, executions, claims and demands whatsoever, in law or in equity, which may arise or might in the future arise or herein after may arise for or against the Equine Activity Sponsor for the activities as stated above.

This document is meant to be a full and complete release from any and all liability that may arise from participating in the above described equine activity. This release is given freely and voluntarily by the Participant and is meant to remain in existence throughout the duration of the equine activity. **WARNING: Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to or the death of, a participant in equine activities resulting from the inherent risks of equine activities.**

I, the 4-H member also agree that I have read and will follow the guidelines and rules as stated in the State 4-H Horse Show Official Rule Book.

Dated this _____ day of _____, 2018

Participant

Legal Guardian

****If Mailing Registration Form Please Postmark by March 21st**
Cattle and Dressage Classes MUST Preregister by March 26th.**

Checks Payable to: Sumter County 4-H

Drop off or Mail to: UF/IFAS Extension Sumter County Attn: Sumter County 4-H Horse Show
7620 SR 471, Ste. 2, Bushnell, FL 33513

Kalan Taylor, 4-H Youth Development Agent; Acceptance of Equine Activity Sponsor
(Tel.) 352-569-6874 (Fax) 352-569-6861 kagers02@ufl.edu