



# THE GIFT HORSE NFHJA MAY SHOW

SUNDAY, MAY 30, 2010 ~ PRE-ENTRIES CLOSE FRIDAY MAY 21, 2010

**STALLS MUST BE PRE-PAYED OR RESERVED WITH A CREDIT CARD TO GUARANTEE RESERVATION.**



OFFICE USE	HORSE:	PONY SIZE:	AM. AGE
	CLASSES:	RIDER :	
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PRE-ENTRIES: \$10.00 per class

POST-ENTRIES: \$10 FEE PER ENTRY

SCHOOLING FEES: \$12.00 per horse - No Schooling fee for Walk, Walk/Trot or Leadline Classes

**\*\*EXHIBITORS THAT PARTICIPATE IN FCHJA ON SATURDAY WILL NOT BE CHARGED A NFHJA SCHOOLING FEE\*\***

**RIDER:**

**ADDRESS:**

**CITY/ STATE / ZIP:**

**PHONE / FAX:**

**SIGNATURE:**

**RIDER:**

**ADDRESS:**

**CITY/ STATE / ZIP:**

**PHONE / FAX:**

**SIGNATURE:**

**OWNER:**

**ADDRESS:**

**CITY/ STATE / ZIP:**

**PHONE / FAX:**

**SIGNATURE:**

**TRAINER:**

PERSON/COMPANY RECEIVING PRIZE MONEY

SOCIAL SECURITY OR FEDERAL ID #

**STABLE WITH:**

North Florida Hunter-Jumper Association, Inc.,  
Clay County Agricultural Center,  
Clay County Board of County Commissioners

THE OWNER 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, GROOM, ATTENDANT OR OTHER EMPLOYEE OR ANIMAL OR ANY EQUIPMENT AT THIS SHOW.

CARD HOLDER'S NAME

STREET/PO BOX

CITY/STATE/ZIP

CARD #

MASTERCARD/VISA/AMERICAN EXPRESS

EXP. DATE

SIGNATURE

ASSOCIATION MEMBER FEES (lifetime or once a year fee)

\_\_\_ SECURITY/EMT FEE \$10.00 / HORSE

\_\_\_ SCHOOLING \$12.00 / HORSE

\_\_\_ STALLS \$30.00 PRE ENTRY  
\$40.00 POST ENTRY

\_\_\_ SHAVINGS \$6.50 / BAG

\_\_\_ CANCELLATION FEE \$15.00 / HORSE

\_\_\_ OFFICE FEE \$15.00 / ENTRY

\_\_\_ POST-ENTRIES \$10.00 / ENTRY

**AMOUNT DUE:**

**PAID BY:**

**RIDER-OWNER-STABLE**

**CASH OR CHECK #**

***\*MAKE CHECKS PAYABLE TO***

North Florida Hunter-Jumper Association, Inc.

NFHJA ~ Post Office Box 24031 ~ Jacksonville, Florida 32241

Before Show Contact: alexisgnewman@gmail.com ~ (904) 993-2053

During Show Phone: (904) 284-1579

**MEMBERSHIP APPLICATION  
NORTH FLORIDA HUNTER-JUMPER  
ASSOCIATION, INC.**

**Post Office Box 24031, Jacksonville, Florida 32241**

I hereby apply for membership for the 201\_\_ competition year and  
enclose payment of \$\_\_\_\_\_.

\_\_ Junior \$25 \_\_ Senior \$35 \_\_ Family \$50

\_\_ Stable \$50 \_\_ Life \$300

\*In family memberships - please designate Senior Members with an \*

Names: \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Date of Birth (Junior): \_\_\_\_\_

Adult Amateur/Amateur Owner: \_\_\_\_\_ 18-35 \_\_\_\_\_ over 35

List Horses/Ponies leased or owned and circle Horse or Pony:

Name of Animal: \_\_\_\_\_ Horse/Pony

Name of Animal: \_\_\_\_\_ Horse/Pony

Name of Animal: \_\_\_\_\_ Horse/Pony

Name of Animal: \_\_\_\_\_ Horse/Pony

**Membership amount:** \_\_\_\_\_

**Membership type:** \_\_\_\_\_

**Membership date:** \_\_\_\_\_

**Membership expires: November 30 of each year.**

**EQUINE ACTIVITY SPONSOR RELEASE**

**FLORIDA LAW**

**KNOW ALL MEN BY THESE PRESENTS**, that \_\_\_\_\_  
who resides at \_\_\_\_\_  
(hereinafter referred to as "**Participant**"), desires to engage in and does hereby  
engage in the following activity, to wit:

**NORTH FLORIDA HUNTER-JUMPER ASSOCIATION HORSE SHOW**  
located at **CLAY COUNTY AGRICULTURAL CENTER**,  
2463 State Road 16 West, Green Cove Springs, Florida 32043.

**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, billing, contracts, controversies, agreements,  
promises, damages, variances, judgements, executions, claims and demands  
whatsoever, in law or in equity, which may arise or might in the future arise  
herein after may arise for or against the Equine Activity Sponsor for the activi-  
ties as stated above.

**THIS** document is meant to be a full and complete release from 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.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Participant \_\_\_\_\_

Legal Guardian (If Participant is a minor child) \_\_\_\_\_

Acceptance of Equine Activity Sponsor \_\_\_\_\_

The Sunshine State Horse Council