



Please fill out one form per horse, by **May 1, 2024**. Payment in full via cash, cheque, e-transfer (blueskyclassichorshow@gmail.com) or credit card.

Horse Information:	
Name:	Horse Record#:
Age:	Sex: Ponies: <input type="checkbox"/> sml <input type="checkbox"/> med <input type="checkbox"/> lrg Stable with:

Rider Information:	
First Name:	Last Name: <input type="radio"/> JR <input type="radio"/> AM
Street Address:	City & Prov.: Postal Code:
Phone Number:	Email:
EC#	EC Level: Jump Alberta#: CET#: AEF#:

Owner Information:	
First Name:	Last Name: EC#:
Email:	Phone Number:

Trainer Information:	
First Name:	Last Name: EC#:

Entries:										
Division/Class Numbers:										
Division/Class Entry Fees:										

Waiver/Signatures	
<p>I certify that the horse and rider are eligible as entered and agree for myself and my representatives to be bound by the Equestrian Canada Rules and Regulations and the Blue Sky Classic Horse Show 2024 Prize List including, without limitation, the code of conduct and the Liability Clauses. By signing this entry form I am hereby acknowledging that I have read and agree to the section in the 2024 Blue Sky Classic ENTRY FORM WAIVER, and the complete set of rules and regulations within.</p>	<p>and agree for myself and my representatives to be bound by the Equestrian Canada Rules and Regulations and the Blue Sky Classic Horse Show 2024 Prize List including, without limitation, the code of conduct and the Liability Clauses. By signing this entry form I am hereby acknowledging that I have read and agree to the section in the 2024 Blue Sky Classic ENTRY FORM WAIVER, and the complete set of rules and regulations within.</p>
Signature of Rider or Parent/Legal Guardian	Date
Signature of Owner/ Agent	Date

Person Responsible	
<p>EC Article A1011: Person Responsible for the care/custody of horse. EC Article A519 Vaccinations: I hereby certify that the horse has met the requirements of Article A519, Vaccinations, Section Rules of Equestrian Canada.</p>	<p>training and performance of horse listed on this entry form A, General Regulations,</p>
Signature of Rider or Parent/Legal Guardian	Date

Vaccinations	
<p>I have attached documentation that this horse has been vaccinated against Equine Influenza, EHV1 and EHV4 within the last 6 months. proof of vaccinations MUST be sent in with your entry form.</p>	<p>Initial: _____</p>

Credit Card	
Name on Card:	Expiry: _____
Card Number:	CSV Code: _____
Signature: _____	
<p>I authorize Blue Sky Classic to charge the above card for all amounts due for the Blue Sky Classic Horse Show.</p>	

Total Entry Fees	
Jumper Nominating Fee	\$125.00
Hunter Ring Schooling Round <small># of rounds ___ x \$30/round</small>	
Administration Fee	\$95.00
Medic Fee	\$40.00
Stabling Fee: # of Stalls ___ x \$250.00	
Day Stall Fee: # of Stalls ___ x \$85.00	
Shavings: # ___ x \$12.00 per bag	
Post Entry Fee (\$100)	
Haul in Fee \$60/day or \$10/week	
RV Power Hookup (\$200)	
GST (5% of above)	
Temporary Horse Recording	\$79.00
Gold Competition Fees	\$38.00
TOTAL (DEPOSIT \$250)	

If you have a Horse Record or Membership sign here to acknowledge you have read the EC rules in the prize list for these.

Signature of Rider or Parent/Legal Guardian
