

***PUCKERBRUSH FARM PRESENTS
THE Eleventh ANNUAL
HALLOWEEN JUMPER FUN SHOW***

Sunday, October 14, 2012

9:00 a.m. Rain or Shine

Divisions: Vampires 18 and Under; Devils – 19+

Cost: \$10 per class, \$30 for the day

All horses must have proof of **negative Coggins** within one year of show date (in state) or 6 months (out of state). **NO JACKETS ALLOWED but costumes are!!** Spooky prizes. Management reserves the right to combine any classes.

Pre-registration appreciated but not required!

Please include a negative Coggins with your registration.* Checks should be made payable to Puckerbrush Farm* Send entries to Puckerbrush Farm 97 Miles Rd. Newburgh, ME 04444

Horse _____ Breed _____
Rider _____ Phone _____
Address _____
Email _____ Birth Date _____
Owner of Horse (If different than Rider) _____
Address _____

Classes offered will be broken down into age groups where entries permit.

Classes: 18", 2', 2'3", 2'6", 2'9", 3', 3'3"
Classes entered

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 and spectator.

In consideration, therefore, for the privilege of riding and or working around horses at Puckerbrush Farm LLC, located at Miles Road, Newburgh, ME, the Undersigned does hereby agree to hold harmless and indemnify Puckerbrush Farm LLC, together with it's owners, agents, and employees from any and all injury or damage that may be sustained by me, my family, my guests and/or invitees resulting from participating in any form of exercise, activity and/or sport including but not limited to trail riding, dressage, or other equestrian activity.

The Undersigned further agrees to hold harmless and indemnify Farm LLC, owners, agents and employees from any liability or responsibility for accident, damage, injury or illness to any horse owned, leased, or under the care and custody of the Undersigned on the premises.

Signature of Participant _____ Date _____

If under 18 signature of Parent/Guardian _____ Date _____