

2009 Hickory Knoll Combined Driving Event

Hickory Knoll Farm
5438 Highway M
Fitchburg, WI 53575
July 18 and 19, 2009

DRIVER INFORMATION:

Name: _____

ADS Number: _____ DOB if junior: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone # 1: (____) _____ Phone # 2: (____) _____

HORSE INFORMATION:

Horse 1: _____

Height: _____ Age: _____ Sex: _____ Breed: _____

Horse 2: _____

Height: _____ Age: _____ Sex: _____ Breed: _____

Horse 3: _____

Height: _____ Age: _____ Sex: _____ Breed: _____

Horse 4: _____

Height: _____ Age: _____ Sex: _____ Breed: _____

LEVEL (circle 1):	Training	Preliminary
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DIVISON (circle 1):	Pony	Pony Pair
	Horse	Horse Pair
	Pony Tandem	Horse Tandem
	Pony Four-In-Hand	
	Horse Four-In-Hand	

FEES:

Entry Fee: \$90 \$ _____

Late Entry: \$100 \$ _____

Show from Trailer: \$40 \$ _____

Stall Fee: \$75 \$ _____

Total Enclosed \$ _____

Make Checks payable to the Hickory Knoll Foundation

**Current Coggins photocopy must be attached
BOTH SIDES OF ENTRY FORM MUST BE COMPLETED**

Incomplete entries will be returned. Only ADS members may enter the Competition. We are limited to 54 entries. Competition will include dressage, cones and a marathon with four obstacles. See Omnibus for general information

American Driving Society Disclaimer

To be signed by every competition participant, including each person who rides with a driver on a carriage or assists in handling horses even from the ground, not only during the actual competition but including any time from arrival at the competition to departure.

I understand that neither the American Driving Society (ADS) and its officers, the Hickory Knoll Driving Competition (Competition), Competition judges, officials or organizing committee nor the property owners accept any responsibility for accidents, damage, injury or illness to the horses, riders, grooms, passengers, attendants, spectators or any other person or property in connection with this Competition. I hereby expressly agree for myself and my principals, representatives, employees, and agents: (1) to be bound by the rules and bylaws of the ADS and any local rules of the Competition; (2) that every horse, driver, attendant, groom and/or passenger is eligible as entered; and (3) and to accept as final any decision of the Competition officials on any question arising under ADS rules and by-laws and any local rules of the Competition, and agree to hold the ADS, its officers, directors, employees and agents, and Competition judges, official and organizing committee as well as the property owners harmless for any action taken or not taken. I am fully aware that horse sports, including driving, and this Competition involve inherent dangerous risk of serious injury or death and by participating I do voluntarily expressly assume any and all risks of injury, death or loss, and agree to indemnify and hold the ADS, its officers, directors, employees and agents, and Competition judges official, and organizing committee harmless against all claims including any injury of loss suffered or in conjunction with the Competition, whether or not such claim, injury or loss resulted either directly or indirectly, from the negligent acts or omissions of the ADS, its officers, directors, employees and agents or the Competition judges, officials and organizing committee or the owners of the land utilized for the event or the City of Fitchburg over whose streets vehicles may travel.

All signatories also acknowledge and accept Wisconsin Statue, section 895-481 (1) (E) limiting the liability of Hickory Knoll Farm, McGibbon Farm and Frostwood Farm, LLC., its owners, employees and volunteer workers for any loss, injury or death that may occur on the Farms from arrival to departure.

Driver Signature (or parent/ guardian if under 18):

Print Name: _____ Date: _____

Groom/navigator/passenger/attendant signature:

Print Name: _____ Date: _____

Groom/navigator/passenger/attendant signature:

Print Name: _____ Date: _____

Groom/navigator/passenger/attendant signature:

Print Name: _____ Date: _____