

# ***MBRA JACKPOT - North Sydney***

## ***June 24-25***

Name:	MBRA #
Address:	Phone #
Horse Name:	
Insurance Info:	

Email Address

	Class	Saturday	Sunday
Smallfry no class fee	Barrels		
(HEAD FEE ONLY)	Poles		
	Dash		
Pony no class fee	Barrels		
(HEAD FEE ONLY)	Poles		
	Dash		
Jr. Horse (\$10)	Barrels		
Youth (\$5)	Barrels		
	Poles		
Adult Green (\$10)	Barrels		
	Poles		
Novice (\$10)	Barrels		
	Poles		
Open (\$20)	Barrels		
	Poles		
3D Barrels (\$15) <input type="checkbox"/> ROLL OVER	Sat Only		XXXXXXXXXXXX
Class Fee Total			
Head Fee	60\$		
Camping fee 20\$ per night			
Total Fee			

ALL ENTRIES & ETRANSFERS MUST BE DONE BY Sunday, June 17th

Email Entry Form to mbracb@gmail.com

Erica Johnson 902-574-6998

Entries must be paid by etransfer to mbrapayments@gmail.com

password: mbra2023

**With the etransfer please note what and who you are doing the transfer for c/w with Back #**

If you are requesting to be stabled by someone please request it **ON THIS FORM**

**Waivers must be signed and included with entry form**

(NO ENTRY IS COMPLETE WITHOUT SIGNED WAIVER)

**\*\* NOTE NEW RULE 1.22 Ponies and horses are limited to**

**3 runs per day, with the exception of the small fry division**

**THE FIRST 3 CLASSES CHECKED ON THE ENTRY FORM**

**WILL BE THE CLASSES YOU ARE ENTERED IN**

**MAKE SURE YOUR MBRA # IS ON THIS ENTRY FORM IF NOT YOU WILL BE**

**GIVEN A TEMPORARY NUMBER WHICH WILL APPLY TO THIS SHOW**

## Maritime Barrel Racing Association

### WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in a Maritime Barrel Racing Association sanctioned event, and in particular the Jackpot/Show being known as MBRA Jackpot, @ The North Sydney Exhibition Grounds, North Sydney, NS - June 22 - 25, 2023+.

as well as any and all activities related to such event, the undersigned acknowledges, appreciates and agrees that

1. The risk of injury from the activities involved in this type of event is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist and
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation and
3. I willingly agree to comply with the stated and customary terms and conditions for participation in this event. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Maritime Barrel Racing Association, their officers, officials, agents and /or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHER WISE.
5. I agree to abide by all of the rules, regulations, and policies of the Maritime Barrel Racing Association while participating at this event.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_  
PARTICIPANT'S SIGNATURE

X \_\_\_\_\_ Date Signed \_\_\_\_\_  
PRINT NAME

### FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above,

X \_\_\_\_\_  
PARENT/GUARDIAN'S SIGNATURE

\_\_\_\_\_  
EMERGENCY PHONE NUMBER

X \_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
NAME OF MINOR (please print)