

Killerney Farms

2020 Development Series

Sunday February 16 Heart Month – Wear Red
Sunday March 15 St Patricks Day – Wear Green

Sunday April 19 Easter – Wear Pastels

flat warm up 7:30 to 8:30 am – Division 1 warm up over fences 8:30 – 9:00 am – 15 minute warm up for each division

ENTRIES ACCEPTED ON DAY OF SHOW ONLY; HOWEVER, IF YOU WOULD DROP US A NOTE ON FACEBOOK OR EMAIL TO LET US KNOW YOU ARE COMING AND WHAT DIVISIONS YOU ARE IN SO WE CAN HAVE A ROUGH SCHEDULE

PLEASE BRING AN ITEM FOR THE POT LUCK LUNCH

Start 9:00 first class

1. CROSSRAIL 0.50M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

2. 0.60M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

3. 0.70M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

MINI PUISSANCE WALL Low

\$50 plus Jackpot \$20 entry fee

4. 0.75M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

5. 0.85M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

6. 0.90M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

7. 1.0M DIVISION

- A) Table 238.2.1 One Round, Optimum Time
- B) Table 238.2.2 Jump Off, Optimum Time
- C) Table 238.2.2 – Barrage

MINI PUISSANCE WALL Advanced

\$50 plus Jackpot \$20 entry fee

Optimum Time - time will be posted on the course plan; the horse with the time on course closest to this Optimum Time without going over time allowed will win. Optimum Time is 4 seconds under the Time Allowed.

Table 238.2.2 -First round clears will go to 2nd round for jump off against the clock.

Placings 1st to 5th in all classes.

Killerney Farms

Development Series

FEB 16

MAR 15

APR 19

WILL ACCEPT ENTRIES ON THE DAY OF THE SHOW OR EMAIL TO killerneymfarms@shaw.ca.

DIVISIONS ENTERED: _____

TOTAL # OF DIVISIONS _____ X \$45 = _____

ADMIN FEE = \$15

STABLING IF APPLICABLE (\$40 per night) _____
(please email or call to reserve) (bedding included)

GST _____

TOTAL COST _____
(cheques payable to KILLERNEY FARMS HORSE SHOW)

NAME OF RIDER: _____ AGE: _____

ADDRESS: _____ PH: _____

NAME OF HORSE: _____ BREED: _____

AEF NUMBER: _____ STABLE: _____

EMAIL ADDRESS: _____

I acknowledge that the sport of horses is a risk sport and that I am participating at my own risk and in full knowledge of the hazards which are inherent in this sport. I further acknowledge the inherent risks in riding and working around horses, which risks include bodily injury to both horse and rider which can result from normal use, competition, or schooling. It is hereby also understood that no helmet or protective equipment can protect against all foreseeable injury. In consideration of being allowed to participate in this event, I hereby assume all risk and I hereby release and absolve Killerney Farms, their directors, officers, employees, volunteers, and representatives, and their personal representatives, from all responsibility, liability or claims of any nature and kind which I may have arising from my participation in this activity, including but not limited to bodily injury or death to myself or my horse(s) and damage to property arising from any cause whatsoever, including the negligence of one or more of the individuals and organizations referred to herein.

I hereby declare that in signing this document, that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

SIGNATURE OF RIDER: _____

If rider is under eighteen (18) years of age, the parent/ legal guardian **MUST** sign below

I acknowledge as parent/ legal guardian of _____ that I have read and fully understand and agree to the terms and conditions stated herein on behalf of my child and myself.

Parent/ Legal Guardian _____ Date _____