



CENTRAL JERSEY HORSEMAN'S ASSOCIATION

2017 Competitors Application

Type or print legibly – all fields are required – Horse form required for riders!

COMPETITORS NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ SHOW AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ PARENT CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS (NEWS & ALERTS) \_\_\_\_\_ STAY INFORMED

BARN NAME: \_\_\_\_\_ TRAINER NAME: \_\_\_\_\_

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INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED!

YOU MUST USE THE HORSE REGISTRATION FORM TO REQUEST A BACK NUMBER FOR EACH HORSE

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RELEASE AND HOLD HARMLESS AGREEMENT

By submitting this application for competitor's membership in the Central Jersey Horseman's Association (CJHA), I agree to abide by all rules and regulations of CJHA. Furthermore I understand that activities involving horses are inherently dangerous, that a horse's behavior and actions are unpredictable and can result in property damage, injury or death to animals, participants or spectators and that my participation in these activities is at my own risk. I also understand that neither CJHA, its officers or members nor the Monmouth County Park System may be held liable for any accident, damage. Loss, injury, illness, or death to the horses, equipment, owners, riders, attendants, spectators or any other person or property whatsoever in connection with a CJHA sponsored event or activity regardless of cause or negligence.

WARNING: UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES, PERSUANT TO P.L.1997 (C.5:15-1 et seq)

SIGNATURE \_\_\_\_\_ DATE : \_\_\_\_\_

HIGH POINT RIDER (\$40):\_\_\_ SINGLE DAY RIDER (\$5)\_\_\_ ASSOCIATE/NON-RIDING TRAINER(\$25)\_\_\_

POINTS FOR YEAR END AWARDS WILL BE COUNTED FROM DAY OF HIGH POINT MEMBERSHIP. ENTRY MUST COMPETE IN AT LEAST 3 SHOWS IN THE SAME DIVISION IN ORDER FOR POINTS TO COUNT TOWARDS YEAR END AWARDS.

PLEASE MAIL FORMS WITH PAYMENT TO : CJHA P.O. BOX 588, FARMINGDALE, NJ 07727 – CONTACT US AT [info@cjha.org](mailto:info@cjha.org).

