



**Arabian Springfest I & II
HORSE SHOWS
April 3-5 2015**

SEND TO: Gary Paine
17525 G76 Hwy Lacona, IA 50139
641-466-3320
GLPAINE@YAHOO.COM

PLEASE TYPE OR PRINT, ONLY ONE OWNER PER ENTRY FORM. All entries must be complete. Enclose correct fees, copies of horse registration papers, USEF/EC membership cards, amateur certification (if applicable), and AHA membership cards for each rider, driver, handler, and owner.

Horse Name		Reg. No.	DOB	Sex	Color	Height	Entry Fees	
Sire		Dam			USEF Horse id #			
Rider/driver/handler		AHA #	Class Numbers					Entry Fees
USEF/EC #								
Rider/driver/handler		AHA #	Class Numbers					Entry Fees
USEF/EC #								
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Rider/driver/handler		AHA #	Class Numbers					Entry Fees
USEF/EC #								
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USEF/EC #								

Each person signing this entry form acknowledges that he/she has read the front and reverse side of this entry form and agrees to the applicable terms, conditions, waivers and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge. All OWNERS, RIDERS, DRIVERS & HANDLERS MUST SIGN ON THE BACK. Minor entrants must also have parent/guardian signature(s) on the back.

*****PHOTO COPIES REQUIRED of all Reg Papers, Both AHA and USEF Membership cards for all owners/riders/trainers or PAY POST ENTRY FEE.*****

TOTAL CLASS FEES	\$ _____
Horse Stalls \$75	\$ _____
Tack Rooms \$75	\$ _____
\$8 Drug; \$8 USEF Admin Fees @ \$16 per horse	\$ _____
Resolution 9-90/AHA Fee \$13.00 per horse	\$ _____
Office fee \$30.00 per horse	\$ _____
TBA Class \$60	\$ _____
AHA Single Event Membership Fees @ \$35 per show	\$ _____
USEF Show Pass fee \$30.00	\$ _____
Sponsorship	\$ _____
ENCLOSED TOTAL FEES	\$ _____

OWNER (as appears on reg. papers or contract)

Name _____ AHA # _____
 Address _____ USEF # _____
 City, State, Zip _____ Phone _____
 Email _____
 Trainer _____ AHA # _____
 Address _____ USEF # _____
 City, State, Zip _____ Phone _____
 Email _____
Rider/Driver/Handler Info if Different than owner or Trainer and all YOUTH EXHIBITORS
 Emergency Phone _____

**Make Checks Payable to:
Arabian Springfest Horse Show
****ENTRIES CLOSE****
March 18th**

Name _____
 Address _____
 City, State, Zip _____ Youth Birth Date _____
 Amateur Owner Relationship to Horse Owner _____

STABLE WITH _____
 (Send request for joint stabling in the same envelope)

Entry Form Must Be Signed on
Reverse Side

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Federation must be brought in New York State.

Release, Assumption of Risk, Waiver and Indemnification

This document waives important legal rights. Read it carefully before signing.

I AGREE in consideration for my participation in this Competition to the following:

I AGREE that the "Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("Harm").

I AGREE to hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while at the Competition.

I have read the Federation Rules about protective equipment, including GR801 and, if applicable, EV114 and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries.

If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf.

I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment to the Federation on the official USEF accident/injury report form.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

RIDER/DRIVER/HANDLER/

OWNER/AGENT

Vaulter/Longeur (mandatory)

(mandatory)

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

TRAINER

COACH

(mandatory)

(if applicable)

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____

Print Parent//Guardian Name: _____

Emergency Contact Phone No. _____

Is Rider/Driver/Vaulter a U.S. Citizen: _____ Yes _____ No