

NORTHWEST AUTUMN CLASSIC HORSE SHOW SEPTEMBER 14-18, 2011

Entries Close August 24, 2011

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OWNER				RIDER				TRAINER			
Owner Name		Fider Name		Trainer Name		Address		Address		Address	
Address		Address		Address		City		City		City	
City		City		City		State		State		State	
Social Security # or TIN #		E-Mail		E-Mail		Phone		Phone		E-Mail	
Phone		USEF/USHJA#		USEF/USHJA#		Barn Phone		Barn Phone		Cell Phone	
USEF/USHJA#		EC		EC		Date of Birth		Date of Birth		USEF/USHJA#	
W&H&JA		EC		EC		Age as of 12/1/2010		ASP-		W&H&JA	
Prize money paid to if other than owner		RIDER		RIDER		VISA/MC #		CREDIT CARD PAYMENT			
Name		Rider Name		Rider Name		Exp. Date		Signature			
Address		Address		Address		Date of Birth		Print Name			
City		City		City		ASPCA#		State			
Social Security # or TIN #		AGE		COLOR		SEX		HEIGHT		DIVISIONS / CLASSES	
NAME OF HORSE		1st Yr.		2nd Yr.		Sm		Md		Lg	
Measurement #		Please Circle below if applicable									
USHJA #											
<p>USEF Release, Assumption of Risk, Waiver and Indemnification</p> <p>I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR 906.4) as printed in the Prize List for his Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to the Federation Rules, 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. This document waives important legal rights. Read it carefully before signing.</p> <p>I AGREE in consideration for my participation in this Competition Northwest Autumn Classic Horse Show to the following:</p> <p>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").</p> <p>I AGREE to 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 caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the Federation or the Competition.</p> <p>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.</p> <p>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 at the Competition. I have read the Federation Rules about protective equipment, including GR 801 and EV 113, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me that I 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 assume all of the obligations of this Release on the child's behalf.</p> <p>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 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. I represent that I have the requisite training, coaching, and abilities to safely compete in this competition.</p> <p>BY SIGNING BELOW, I AGREE to be bound by applicable Federation Rules and all terms and provisions of this entry blank.</p>											
<p>TOTAL ENTRY FEES FROM ABOVE:</p> <p>_____ Stalls for entire show @ \$195</p> <p>Weekend Stall (Friday - Sunday) \$145</p> <p>Camper/Trailer parking Hook-ups @ \$170/week, \$45/day</p> <p>Camper/Trailer parking Hook-ups (Septic Tank) @ \$190/week</p> <p>Camper/Trailer parking (No Hook-ups) @ \$110/week, \$30/day</p> <p>Haul-In Fee, \$35/day per horse</p> <p>Mandatory Schooling Fee, \$30 per horse</p> <p>Shavings & Manure Disposal Fee, \$95 per horse</p> <p>Weekend Shavings & Manure Disposal Fee \$65 Per Horse</p> <p>Credit Card Convenience Fee, \$25</p> <p>USEF Fee, \$15 per horse (Drugs & Meds \$7. USEF \$8)</p> <p>USEF Non-Member Fee, \$30</p> <p>USH&J Non-Member Fee, \$30</p> <p>W&H&J Non-Member Fee \$5</p> <p>USHJA Zone Support Fee \$2</p> <p>TOTAL AMOUNT OWED:</p>											

OWNER/AGENT		RIDER/HANDLER		TRAINER	
SIGNATURE:		SIGNATURE:		SIGNATURE:	
Print Name:		Print Name:		Print Name:	
Is Rider/Handler a U.S. Citizen (please circle):		YES NO		YES NO	
Parent/Guardian Sig.:		SIGNATURE:		SIGNATURE:	
(Required if Rider/Handler is a minor)		Print Name:		Print Name:	
Is Rider/Handler a U.S. Citizen (please circle):		YES NO		YES NO	

CHECKS PAYABLE TO: Northwest Autumn Classic Horse Show (US Funds)
 Barbara Baerle (360) 668-0518 Fax (360) 668-9179
 19716 82nd Ave. S.E. Snohomish, WA 98296

Stable With: _____
 Arrival Date: _____
 Emergency Contact Phone Number: _____

Payment # _____ Total Enclosed \$ _____