



Arabian Sport Horse Celebration

SATURDAY – SUNDAY, JUNE 1-2, 2019
DONIDA FARM EQUESTRIAN CENTER AUBURN, WASHINGTON

Mail to:
Arabian Sport Horse Celebration
% Lisa Kolke
16017 NE 319th Street
Battle Ground, WA 98604-7821

ENTRIES: OPEN APRIL 3rd | CLOSE MAY 2nd

Complete a separate entry form for each horse. If more than 3 riders / handlers, please use a second form. **Everyone sign on the back!**

HORSE	Horse's Registered Name		Registration#	Date of Birth	Gender	<input type="checkbox"/> Arabian <input type="checkbox"/> Half-Arabian <input type="checkbox"/> Anglo-Arabian			
	Sire		Dam		Horse's USEF#	Horse's USDF#	Height	Color	
<input type="checkbox"/> Current Reg Papers <input type="checkbox"/> Owner 2019 AHA COMPETITION Card <input type="checkbox"/> Trainer 2019 AHA COMPETITION Card <input type="checkbox"/> Riders 2019 AHA COMPETITION Card <input type="checkbox"/> Amateur 2019 USEF Card									

Rider/Handler #1 Name:			Rider/Handler #2 Name:			Rider/Handler #3 Name:		
Class #	Class Name/Test/ Test of Choice	Fee \$	Class #	Class Name/Test/ Test of Choice	Fee \$	Class #	Class Name/Test/ Test of Choice	Fee \$

OWNER (Exactly as it appears on horse registration papers or contract)

Name _____

Address _____

City/State/Zip _____

USEF/EC# _____ AHA# _____ USDF# _____

Phone : _____ Cell: _____

e-mail: _____

Farm/Ranch/Business (for horses owned by) _____

Farm USEF# _____ AHA# _____

TRAINER ADULT Responsible for care and custody of the horse while on the grounds

Name _____

Address _____

City/State/Zip _____

USEF/EC# _____ AHA# _____ USDF# _____

Phone : _____ Cell: _____

e-mail: _____

STABLING (One horse per stall. Stalls may not be sold or sublet.)

Stable with: _____

If Camping, vehicle description, plate no & state _____

Total Entry Fees:

_____	Post Entry / Change Fee per class	_____	_____
_____	Horse Stall or Tack Room Show (Fri -Sun)	_____	_____
_____	Horse Stall or Tack Room by Day	_____	_____
_____	Additional Bales of Shavings	_____	_____
_____	Dog Permit, per dog for the weekend	_____	_____
_____	Early Arrival/Late Departure	_____	_____
_____	Camping with or w/o hookup per night	_____	_____

Mandatory Fees:

_____	Office Fee	_____	_____
_____	USEF Drug Fee (Includes \$15 Drugs/ Medication Fee + \$8 Admin)	_____	_____
_____	AHA Judges & Stewards Ed Fee	_____	_____
_____	AHA Post Competition Fee	_____	_____

To Become a Member (AHA/USEF):

_____	AHA COMPETITION Membership w/club affiliation	_____	_____
_____	USEF ADULT COMPETING (+Amateur) @\$80	_____	_____
_____	USDF ADULT PARTICIPATING @\$90	_____	_____

Non-Member Fees (AHA):

_____	AHA Single Event Membership Fee @ \$35/person	_____	_____
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Optional Fees:

_____	Class Sponsorship	_____	_____
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Checks payable to DONIDA **Enclosed Total Fees** _____

AHA ENTRY AGREEMENT

I have read the rules concerning competitions as printed in the Arabian Horse Association (AHA) Handbook / Directory and Competition Prize List and agree to be bound by and subject to those Rules.

AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION THIS DOCUMENT WAIVES VERY IMPORTANT LEGAL RIGHTS. READ IT CAREFULLY BEFORE SIGNING.

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

I AGREE that I choose to participate voluntarily in this Competition, as a rider, driver, handler, lessee, owner, agent, coach, trainer, junior exhibitor, or as a parent or guardian of a junior exhibitor. I AM FULLY AWARE AND ACKNOWLEDGE THAT HORSE SPORTS AND PARTICIPATION IN THIS COMPETITION INVOLVE SERIOUS RISK OF HARM INCLUDING, BUT NOT LIMITED TO, RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN, AND SUFFERING, AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF HARM TO ME, MY HORSE OR MY PROPERTY.

I AGREE for myself, my heirs, executors, administrators, successors and assigns to release AHA, the Competition, the facilities leased by the Competition and the owner(s) of the facilities, and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me to the fullest extent permitted by law that arises out of or relates in any way to the Competition and my participation in the Competition INCLUDING, BUT NOT LIMITED TO, DAMAGES, LOSS, OR INJURY RESULTING FROM ANY ACTS, FAILURE TO ACT, NEGLIGENCE OR NEGLECT OF OTHER ENTRANTS, THE RELEASED PARTIES, THEIR CONTRACTORS OR INVITEES, as well as for theft, vandalism, fire, other casualty damage, or damage arising out of any defects in the premises.

I AGREE to indemnify and hold harmless (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorneys fees) of whatsoever kind and nature, which may be asserted against or incurred by any of them as a result of (1) my participation in the Competition or (2) any act, failure to act, or neglect (a) by me, my agents, employees, riders, handlers, trainers, coaches, drivers, contractors or invitees, or (b) by any animal owned or exhibited by me or in my custody or control.

I AGREE and represent that I am qualified and eligible to enter and/or participate in the Competition, and every horse I am entering is qualified and eligible as entered.

I AGREE to accept AS FINAL any decision of AHA, the Show Commission or Show Officials concerning my qualification or the qualification of my horse to enter the Competition or any results of the Competition, except to the extent that the Rules of AHA, the Competition, CEF or USA Equestrian permit a protest or hearing of such decisions. Should a hearing be requested, **I AGREE** to accept AS FINAL the decision of the particular hearing body. **I AGREE** to release, hold harmless and not to sue AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Show Commission, Show Officials or any hearing body that relates to my qualifications or my horse(s)' qualifications to enter the Competition or any results of the Competition.

I AGREE that AHA has the sole right to control, sell, supervise or give away (or assign to others the right to do so) the exclusive rights to broadcast, televise, reproduce, transmit and disseminate all or part of this event, and **I AGREE** that AHA may use or assign, in any way AHA sees fit, photographs, films, videos, audios, cablecasts, or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition or AHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way which implies endorsement of any company, product, product category or service. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. By signing below as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions, and further agree to assume all of the obligations of this AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child. This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible.

I AGREE that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain effect.

FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vault or Longeur and on behalf of myself and my principals, representatives, employees and agents, **I AGREE** that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of **DONIDA FARMS ARABIAN SPORT HORSE CELEBRATION**(Competition). **I AGREE** to be bound by the Bylaws and Rules of the Federation and of the Competition. I

will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

FEDERATION 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 herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vault, 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 / HANDLER #1	RIDER / HANDLER #2	RIDER / HANDLER #3
Signature (Adult) _____	Signature (Adult) _____	Signature (Adult) _____
Print Name _____	Print Name _____	Print Name _____
Address _____	Address _____	Address _____
City /St / Zip _____	City /St / Zip _____	City /St / Zip _____
USEF# _____ AHA# _____	USEF# _____ AHA# _____	USEF# _____ AHA# _____
Home _____ Cell _____	Home _____ Cell _____	Home _____ Cell _____
<input type="checkbox"/> AMATEUR / JUNIOR → DOB _____	<input type="checkbox"/> AMATEUR / JUNIOR → DOB _____	<input type="checkbox"/> AMATEUR / JUNIOR → DOB _____
e-mail _____	e-mail _____	e-mail _____
USDF# (if a member) _____	USDF# (if a member) _____	USDF# (if a member) _____
Relationship to Owner _____ <i>If something happens to you, who should we call?</i>	Relationship to Owner _____ <i>If something happens to you, who should we call?</i>	Relationship to Owner _____ <i>If something happens to you, who should we call?</i>
If Rider/Handler is a Minor, Consent: Parent/Guardian Signature _____	If Rider/Handler is a Minor, Consent: Parent/Guardian Signature _____	If Rider/Handler is a Minor, Consent: Parent/Guardian Signature _____
Parent/Guardian Print Name _____	Parent/Guardian Print Name _____	Parent/Guardian Print Name _____
OWNER as shown on horse's registration or Agent Signature (Adult) _____	TRAINER (Adult responsible for horse at show) Signature (Adult) _____	COACH (if coaching at show) Signature (Adult) _____
Print Name _____	Print Name _____	Print Name _____
USEF# _____ AHA# _____	USEF# _____ AHA# _____	USEF# _____ AHA# _____