

ONE OWNER PER FORM

USEF # _____ AMHA # _____

UPHA # _____ USDF # _____

OWNER _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

STABLE WITH _____

**MASSACHUSETTS MORGAN
HORSE SHOW**

August 15-18, 2018

ENTRIES RECEIVED AFTER
MONDAY, AUGUST 6, 2018
WILL BE CHARGED \$100 PER HORSE

Please make checks payable to Massachusetts Morgan
Horse Show and return with this form to:

Kelly McFaul, Secretary
206 S Lark Ln.

Wichita, KS 67209

316-650-2287 FAX: 316-462-0883

kellymca@aol.com

Entry #	Horse Name				Reg #	Sex	YOB	Sire	Dam
					USDF #				
	Classes:					Shown by			
	Classes:					Shown by			

Entry #	Horse Name				Reg #	Sex	YOB	Sire	Dam
					USDF #				
	Classes:					Shown by			
	Classes:					Shown by			

Entry #	Horse Name				Reg #	Sex	YOB	Sire	Dam
					USDF #				
	Classes:					Shown by			
	Classes:					Shown by			

TOTALS

HORSE #1 _____
 HORSE #2 _____
 HORSE #3 _____
 USEF DRUG FEE (includes \$8 D&M)
 @ \$23 _____
 REGULAR STALLS C, D, F BARNs
 @ \$155 _____
 E BARN STALLS
 @ \$125 _____
 MALLARY STALLS
 @ \$170 _____
 TOURNAMENT STALLS
 @ \$125 _____
 OVERNIGHT STALLS
 @ \$60 _____
 TRAILER FEE (for horses not stalled)
 @ \$25 per day _____
 CAMPER SPACE 30 AMP
 @ \$250 _____
 CAMPER SPACE 50 AMP
 @ \$300 _____
 BOX SEATS
 @ \$135 _____
 USEF SHOW PASS FEE
 @ \$45 _____
 AMHA NON-MEMBER FEE
 @ \$45 _____
 OFFICE FEE PER OWNER
 @ \$30 _____
 SPONSORSHIP _____
 LATE FEE (after 8-6-18)
 @ \$100 per horse _____
TOTAL _____

Make checks payable to Massachusetts Morgan Horse Show
 Non-US checks must be marked "payable in US funds"
 If paying by credit card, fill out below.

_____-_____-_____-_____-_____-_____-
 Exp Date _____ Sec Code _____ Zip Code _____
 Signature _____

Rider 1 _____
 Address _____
 City/State/Zip _____
 USEF# _____ AMHA # _____ UPHA # _____ USDF# _____
 Rider 2 _____
 Address _____
 City/State/Zip _____
 USEF# _____ AMHA # _____ UPHA # _____ USDF# _____

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT

Please use this form to list all your customers who are to be stabled with you, including those sent in separately. Requests from entries to be stables with you will not be considered unless their name appears on the list below.

Owners Name	# Stalls
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

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. BOD 1/23/11 Effective 12/1/11

RIDER/DRIVER/HANDLER/ Vaulter/Longeur (mandatory)	OWNER/AGENT (mandatory)	TRAINER (mandatory)	COACH (if applicable)
_____	_____	_____	_____
Signature	Signature	Signature	Signature
_____	_____	_____	_____
Print Name	Print Name	Print Name	Print Name
_____	_____	_____	_____
AMHA	_____	_____	_____
USEF	_____	_____	_____

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

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

WARNING: Under Massachusetts Law, an equine professional is not liable for an injury to, or death of, a participant in equine activities resulting from the inherent risks of equine activities. Pursuant to Chapter 128, Section 2D of the General Law.