

## Summer's End Horse Show September 6-8, 2019

MAIL TO:  
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**CLOSING DATE:**  
**August 23, 2019**

Horse Name		Reg. No.		DOB		Sex		Breed				
Sire				Dam								
Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Entry Fees: \$
Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Entry Fees: \$

(Circle appropriate letter for rider/handler listed below)

Horse Name		Reg. No.		DOB		Sex		Breed				
Sire				Dam								
Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Entry Fees: \$
Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Entry Fees: \$

(Circle appropriate letter for rider/handler listed below)

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

**TOTAL ENTRY FEES:** \$ \_\_\_\_\_

\_\_\_\_\_ Stalls @ \$110 \$ \_\_\_\_\_

\_\_\_\_\_ Tack Rooms @ \$110 \$ \_\_\_\_\_

\_\_\_\_\_ Office Fee @ \$35/horse \$ \_\_\_\_\_

\_\_\_\_\_ AMHA Judges Education Fee \$ \_\_\_\_\_  
(Mandatory: \$2/horse for Morgans only)

\_\_\_\_\_ Camper @ \$45/night \$ \_\_\_\_\_

\_\_\_\_\_ Post Entry Fee @ \$15/horse \$ \_\_\_\_\_

\_\_\_\_\_ Bedding @ \$8.00/bale \$ \_\_\_\_\_

\_\_\_\_\_ Daily Grounds Fee @ \$25 \$ \_\_\_\_\_  
(If showing from trailer)

**ENCLOSED TOTAL FEES:** \$ \_\_\_\_\_

Make checks payable to:

**FMHA**

or provide credit card information below.

You may also make your secure online payment at [www.FMHA.net](http://www.FMHA.net).

<b>Owner Name</b> _____ Address _____ City/State/Zip _____ <b>Coach:</b> _____ <b>Trainer:</b> _____ Address: _____ City/State/Zip _____	AMHA # _____ ASHA # _____ Phone _____  AMHA # _____ ASHA # _____ Phone _____
<b>A</b> Rider/Driver/Handler Name: _____	AMHA # _____ ASHA # _____
<b>B</b> Rider/Driver/Handler Name: _____	AMHA # _____ ASHA # _____
<b>C</b> Rider/Driver/Handler Name: _____	AMHA # _____ ASHA # _____

eMail address: \_\_\_\_\_ **STABLE WITH:** \_\_\_\_\_

**EC WAIVER:** I HEREBY CERTIFY THAT EVERY HORSE, RIDER AND/OR DRIVER IS ELIGIBLE AS ENTERED AND AGREE FOR MYSELF AND MY REPRESENTATIVES TO BE BOUND BY THE CONSTITUTION AND RULES OF THE EQUINE CANADA AT THIS COMPETITION. IT IS HEREBY RECOGNIZED THAT ALL EQUESTRIAN SPORTS INVOLVED INHERENT RISK AND THAT NO HELMET OR PROTECTIVE EQUIPMENT CAN PROTECT AGAINST ALL FORESEEABLE INJURY. I HEREBY ACCEPT THIS RISK AND HOLD HARMLESS THE EC, THE COMPETITION, THEIR OFFICIALS, ORGANIZERS, AGENTS, EMPLOYEES AND THEIR REPRESENTATIVES. (each owner, trainer, rider, driver, handler and their parents/guardians if minors must sign on back.)

**To pay by credit card:**

VISA \_\_\_\_\_ MC \_\_\_\_\_ AMEX \_\_\_\_\_ DISCOVER \_\_\_\_\_ Name on card: \_\_\_\_\_

Card Number \_\_\_\_\_ Exp: \_\_\_\_\_ SN: \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address/City/State/Zip \_\_\_\_\_

**SUMMER'S END HORSE SHOW ENTRY AGREEMENT**

By entering and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulteur or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the local rules of the Summer's End Horse Show as published in the official prize list. I will accept as final the decision of the Horse Show Managers on any question arising under the Rules, and agree to release and hold harmless the competition, 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 FMHA or 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 or sport. 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.

**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 FMHA and "Competition" as used herein includes the Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel and volunteers.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulteur, 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 FMHA 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 FMHA 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 FMHA or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the FMHA 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 Competition Rules about protective equipment, 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 FMHA and the Competition.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federal and State Agriculture Laws, Competition Rules as stated in the official prize list 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 & TRAINER MANDATORY:

RIDER/DRIVER/HANDLER & TRAINER MANDATORY:

OWNER/AGENT (mandatory):

\_\_\_\_\_  
Rider/Driver/Handler Signature

\_\_\_\_\_  
Rider/Driver/Handler Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Rider/Driver/Handler Print Name

\_\_\_\_\_  
Rider/Driver/Handler Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
TRAINER Signature

\_\_\_\_\_  
TRAINER Signature

\_\_\_\_\_  
COACH (if applicable):

\_\_\_\_\_  
TRAINER Print Name

\_\_\_\_\_  
TRAINER Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent/Guardian Signature if under 18 yrs

\_\_\_\_\_  
Parent/Guardian Signature if under 18 yrs

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Emergency Contact Phone No.

\_\_\_\_\_  
Emergency Contact Phone No.

\_\_\_\_\_  
Is Rider/Driver/Handler a U.S. Citizen?

\_\_\_\_\_  
Is Rider/Driver/Handler a U.S. Citizen?

\_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_ Yes \_\_\_\_ No

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