

Key Classic Benefit Morgan Horse Show

May 6, 7, 8 & 9, 2010

Evergreen Equestrian Park, Monroe, WA

Entries Close April 7, 2010

FOR OFFICE USE ONLY

OWNERS NAME (As listed in Program)

ONLY ONE OWNER PER ENTRY BLANK

OWNERS SECTION				TRAINER SECTION				RIDER/DRIVER/HANDLER SECTION			
Print Name				Print Name				Print Name			
Rt/Box/Street				Rt/Box/Street				Rt/Box/Street			
City/State/Country		Zip/Postal Code		City/State/Country		Zip/Postal Code		City/State/Country		Zip/Postal Code	
Phone		SS#		Phone		SS#		AMHA # for Medal Classes		Phone	
USEF #		AMHA #		USEF #		UPHA#		USEF #		JR Ex. Birth Date	
USDF #		UPHA #		USDF #		AMHA #		USDF #		UPHA #	
E-Mail Address:				E-Mail Address:				E-Mail Address:			

Leave Blank	NAME OF HORSE (Class Number Under Name)	TOTAL FEES	DESCRIPTION		NAME OF SIRE AND DAM	RIDER, DRIVER OR HANDLER
			Sex : YOB:	Reg. #	Sire	
			Color: Height:	H ID #	Dam	
				USDF#		
			Sex : YOB:	Reg. #	Sire	
			Color: Height:	H ID #	Dam	
				USDF#		
			Sex : YOB:	Reg. #	Sire	
			Color: Height:	H ID #	Dam	
				USDF#		
			Sex : YOB:	Reg. #	Sire	
			Color: Height:	H ID #	Dam	
				USDF#		

NO. OF HORSES _____ **DATE OF ARRIVAL** _____ **ENTRY FEE TOTAL** _____
 USEF FEE PER HORSE (D&M \$7; USEF Admin. Fee\$8) # _____ @ \$15 _____
 USEF NON-MEMBER Fee Per Exhibitor # _____ @ \$30 _____
 USEF NON-MEMBER Fee Per Amateur Exhibitor # _____ @ \$30 _____
 OFFICE CHARGE PER OWNER (Includes program) # 1 \$ 20.00 _____
 TACK ROOMS # _____ @ \$120 _____
 STALLS # _____ @ \$120 _____
 STALL PANEL REMOVAL Front \$35 pre pay - \$50 at show # _____ @ \$ _____
 EARLY ARRIVAL / LATE DEPARTURE # _____ @ \$30 _____
 BALED SHAVINGS (Bedding not included in stall fees) # _____ @ \$9.75 _____
 HAUL IN FEE # _____ @ \$22 _____
 RV PARKING – PER NIGHT # _____ @ \$26 _____
TOTAL FEES _____
 Include Sponsorships & Advertising **TOTAL AMOUNT ENCLOSED** _____

Horse _____ USEF Rec. # _____

SPONSORSHIPS _____
ADVERTISING _____
TOTAL _____

ATTACH COPIES OF ALL:
 Registration Certificates
 Amateur Certification
 AMHA/USEF and USDF
 Membership Cards.
 USEF Horse ID #

Pay To: KEY CLASSIC BENEFIT
 Secretary: Judy McManama
 11930 East 211th Street
 Noblesville, IN 46060
 (317) 773-3931
**Send regular mail or Fed Ex with
 No Signature requirement**

Complete Stabling Request on Reverse

READ REVERSE CAREFULLY before signing

STABLING REQUEST

DATE OF ARRIVAL _____

Individual _____

Hotel _____

Emergency # _____

Stalls _____ # Tack Stalls _____

Stable Next to: _____
 Request must correspond

TRAINER _____

STABLE NAME _____

of Tack Stalls _____

Client List	# of Stalls
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Federation 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, 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.

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 Key Classic Benefit Morgan Horse Show 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, 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** resulted, 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.

**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:** _____

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