

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 rules of the Competition. I agree to be bound by the rules 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, 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 Competition may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new medial 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. The construction and application of rules are governed by the laws of the State of Indiana, and any action instituted against the competition must be filed in Indiana.

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 the Competition C-Fair Regional Morgan and Open Horse Show to the following:

I AGREE that the "Competition" as used herein included the completion management, as well as 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, 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 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 Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) 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 understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Competition 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 completion, the medical personnel treating my injuries may provide information on my injury and treatment.

BY SIGNING BELOW, I AGREE to be bound by all applicable Rules and all terms and provisions of this entry blank and all terms and provisions of the Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force an effect as if I affixed my signature by my own hand.

Owner (Mandatory)	Trainer (Mandatory)	Rider/Driver/Handler/Agent (Mandatory) <small>Parent/Guardian/Agent if exhibitor is a minor</small>	Rider or Coach (If applicable)
Signature _____ <div style="text-align: center;">Owner</div>	Signature _____ <div style="text-align: center;">Trainer</div>	Signature _____ <div style="text-align: center;">Rider</div>	Signature _____ <div style="text-align: center;">Rider or Coach</div>
Print Name _____	Print Name _____	Print Name _____	Print Name _____
Address _____	Address _____	Address _____	Address _____
City, State, Zip _____	City, State, Zip _____	City, State, Zip _____	City, State, Zip _____
Phone _____	Phone _____	Phone _____	Phone _____
E-Mail _____	E-Mail _____	USEF # _____ ASHA # _____	USEF # _____ ASHA # _____
USEF # _____ ASHA # _____	USEF # _____ ASHA # _____	AHHS # _____ UPHA # _____	AHHS # _____ UPHA # _____
AHHS # _____ ARHPA # _____	AHHS# _____ ARHPA # _____		
UPHA # _____ ADHHA # _____	UPHA # _____ ADHHA # _____		

INDIANAPOLIS CHARITY HORSE SHOW

MAY 27-30, 2020

ENTRIES CLOSE MAY 1, 2020

OWNER'S NAME _____

TRAINER'S NAME _____

SHOW SECRETARY: JUDY McMANAMA, 11930 E 211TH ST, NOBLESVILLE IN 46060 Email: judymack26@gmail.com

Only one owner per entry form. Please print or type. All entries must be complete. Enclose fees, copies of registration papers, lease agreement or certificate to show.

	NAME OF HORSE/PONY	REG NO./ADHHA NO.	COLOR	SEX	HEIGHT	YOB	
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES
	NAME OF HORSE/PONY	REG NO./ADHHA NO.	COLOR	SEX	HEIGHT	YOB	
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES
	NAME OF HORSE/PONY	REG NO./ADHHA NO.	COLOR	SEX	HEIGHT	YOB	
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES
RIDER/DRIVER		UPHA#/AHHS#	JR EXHIB AGE	CLASS NUMBERS			ENTRY FEES

Each person signing this entry form acknowledges that he/she has read the front and reverse side of this entry form and agrees to the applicable forms, conditions, waivers and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge.

Stable With: _____

Horse Arrival _____ Horse Departure _____

Date _____ Date _____

Trainer's Hotel _____

Emergency Contact Number _____

Cell Phone Preferred _____

TOTAL ENTRY FEES _____
 POST ENTRY FEES _____ \$25 per horse _____
 _____ Horse Stalls @ \$125 ea _____
 _____ Tack @ \$125 ea _____
 _____ Academy Stalls @ \$60 ea _____
 VEHICLE PASS _____ @ \$32 ea _____
 OFFICE FEE _____ @ \$20 per Horse _____
 RING SIDE TABLE @ \$175 _____

TOTAL DUE _____

MAKE CHECKS PAYABLE TO:

INDIANAPOLIS CHARITY HORSE SHOW

PLEASE COMPLETE REVERSE SIDE