

ONE OWNER
PER ENTRY
BLANK

Southeastern Charity Horse Show

September 16-19, 2009—Conyers, Georgia

Entries Close
August 14, 2009

OFFICE USE		NAME OF HORSE	REG	AGE	SEX	BREED	USEF HORSE ID	HEIGHT
		RIDER/DRIVER/HANDLER	CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$
C	P	RIDER/DRIVER/HANDLER	CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$

OFFICE USE		NAME OF HORSE	REG	AGE	SEX	BREED	USEF HORSE ID	HEIGHT
		RIDER/DRIVER/HANDLER	CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$
C	P	RIDER/DRIVER/HANDLER	CLASS	CLASS	CLASS	CLASS	CLASS	ENTRY FEES
			FEE	FEE	FEE	FEE	FEE	\$

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			FEE	FEE	FEE	FEE	FEE	\$

WARNING: Under Georgia Law, an equine activity sponsor or equine professional is not liable for any injury to or the death of a participant in equine activities, pursuant to Chapter 12 of Title 4 of the official code of Georgia annotated.

Hotel while in Conyers	Emergency Contact #
_____	_____

MAIL ENTRIES TO:
Southeastern Charity Horse Show
Sara and Galen Ressler
5985 Cuthbert Rd
White Lake, MI 48386
248-922-0148
saressler@aol.com

OFFICE OPENS SEPTEMBER 15
Show Office Telephone
770-602-2510

BEDDING:
QUEENSWOOD PRODUCTS
770-860-9111
Fax 770-860-9177

MAIL PRIZE MONEY TO:
(must furnish social security number on reverse side)
 OWNER TRAINER

BOTH SIDES OF THIS FORM MUST BE COMPLETED AND SIGNED ON REVERSE

HORSE ARRIVAL DATE

Stalls available Monday
9-14-09 after noon

DATE: _____

TIME: _____

STABLE WITH

Must appear on both entry blanks

FOR OFFICE USE ONLY

Amount

Check #

Date Received

Account

Total Class Fees

___ Stalls Fee @ \$90 each _____

___ Tack Stalls @ \$90 each _____

___ Early Arrivals @ \$15 per stall per day _____

___ Grounds Fee (no stall) @ \$15 per day _____

___ USEF Fee @ \$15 Per Horse (D & M \$7, USEF \$8) _____

___ USEF Non-Member Fee @ \$30 _____

___ Office Fee @ \$15 per horse _____

___ Post Entry Fee @ \$10 Per Horse _____

___ Box Seats @ \$175 each _____

___ Sponsorship _____

___ Camper Hookup @ \$25 per day _____

TOTAL FEES

FULL PAYMENT MUST BE ENCLOSED

Make checks payable to:

SOUTHEASTERN CHARITY HORSE SHOW

ONE OWNER PER ENTRY BLANK—COMPLETE BOTH SIDES OF THIS FORM

PLEASE ENCLOSE COPIES OF REGISTRATION PAPERS, COGGINS,
USEF CARDS FOR OWNER, TRAINER AND EACH RIDER/DRIVER/HANDLER,
COPIES OF ALL UPHA, ASHA, AHHS, ARHPA AND MEASUREMENT CARDS WHERE APPLICABLE

◆ALL FEES MUST ACCOMPANY THIS ENTRY◆

MAKE CHECKS PAYABLE TO: Southeastern Charity Horse Show

WARNING Under Georgia Law, an equine activity sponsor or equine professional is not liable for any injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 12 of Title 4 of the Official Code of Georgia annotated. (effective 7-1-91)c

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, 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.

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 the this Competition, Southeastern Charity Horse Show, to the following:

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 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 caused by me or my horse to others, even if the Harm 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 at the Competition.

I have read the Federation Rules about protective equipment, including GR801 and 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 AGREE that "the Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

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, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

OWNER (Mandatory)		
NAME (Please Print)		
ROUTE/BOX/STREET		
CITY/STATE/ZIP		
AC/PHONE#		
SOCIAL SECURITY#	USEF#	ARHPA#
ASHA #	AHHS#	
SIGNATURE—REQUIRED (PARENT/GUARDIAN IF UNDER 18)		

TRAINER (Mandatory)		
NAME (Please Print)		
ROUTE/BOX/STREET		
CITY/STATE/ZIP		
AC/PHONE#	E-MAIL	
SOCIAL SECURITY#	USEF#	ARHPA#
ASHA #	AHHS #	UPHA #
SIGNATURE—REQUIRED (MUST BE 18 OR OLDER)		

By signing, I have read and I agree to the USEF Entry Agreement and Release in the prize list and printed above.

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COACH (If Applicable)	
NAME (Please Print)	USEF #
SIGNATURE	

By signing, I have read and I agree to the USEF Entry Agreement and Release in the prize list and printed to the left.

RIDER, DRIVER, OR HANDLER 3 (If Applicable)		
NAME (Please Print)		
ROUTE/BOX/STREET		
CITY/STATE/ZIP		
USEF #	AMATEUR#	ARHPA#
JR EX AGE	UPHA #	AHHS #
SIGNATURE—REQUIRED (PARENT/GUARDIAN IF UNDER 18)		

By signing, I have read and I agree to the USEF Entry Agreement and Release in the prize list and printed to the left.

RIDER, DRIVER, OR HANDLER 2 (If Applicable)		
NAME (Please Print)		
ROUTE/BOX/STREET		
CITY/STATE/ZIP		
USEF #	AMATEUR#	ARHPA#
JR EX AGE	UPHA #	AHHS #
SIGNATURE—REQUIRED (PARENT/GUARDIAN IF UNDER 18)		

By signing, I have read and I agree to the USEF Entry Agreement and Release in the prize list and printed to the left.

RIDER, DRIVER, OR HANDLER 1 (Mandatory)		
NAME (Please Print)		
ROUTE/BOX/STREET		
CITY/STATE/ZIP		
USEF #	AMATEUR#	ARHPA#
JR EX AGE	UPHA #	AHHS #
SIGNATURE—REQUIRED (PARENT/GUARDIAN IF UNDER 18)		

By signing, I have read and I agree to the USEF Entry Agreement and Release in the prize list and printed to the left.