

Show Secretary

Jan Dunlap

(559) 571-0581

janet.dunlap4@gmail.com

ENTRY FORM

Gold Coast Arabian Horse Association

Coast Classic Horse Show

June 6 - 9, 2019

ENTRIES MUST BE POSTMARKED

BY May 24, 2019

AVOID POST ENTRY FEES

PLEASE TYPE OR PRINT. Only one OWNER per entry form. All entries must be complete. Enclose correct fees, copies of horse registration papers (both sides), purchase contract (if applicable), USEF Membership card, amateur certification (if applicable). AHA membership cards for each rider, driver, handler an owner.

First Horse			Reg. #			DOB	Sex	Color		
Sire			Dam			Horse USEF #				
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	

Circle appropriate letter for rider/handler listed below

Second horse			Reg. #			DOB	Sex	Color		
Sire			Dam			Horse USEF #				
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	

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 the 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 OWNER, TRAINERS, RIDERS, DRIVERS, COACHES, LONGEURS, & HANDLERS MUST SIGN ON THE BACK.** Minor Entrants must also have parent/guardian signature(s) on the back.

TOTAL SHOW FEES SCHEDULE: Total Class Fees \$ _____

OWNER _____ AHA# _____
 Address _____ USEF # _____
 City, State, Zip _____ Phone# _____
 Email Address _____

TRAINER _____ AHA# _____
 Address _____ USEF # _____
 City, State, Zip _____ Phone# _____
 Email Address _____

A Rider/Driver/Handler _____ AHA# _____
 Name _____ USEF # _____

B Rider/Driver/Handler _____ AHA# _____
 Name _____ USEF # _____

C Rider/Driver/Handler _____ AHA# _____
 Name _____ USEF # _____

Amateur Certification (for riders/drivers/handlers in amateur owner classes)
 Amateur Name _____
 Amateur Owner Relationship to Horse Owner _____

Stable with _____

Watsonville 6/19 (R)

- Office fee \$25 \$ _____ per owner
- Stall Fee @\$100 \$ _____ each
- Tack/Ready Room @ \$100 \$ _____ each
- Daily Grounds fee @ \$30 \$ _____ per horse if no stall
- One day stall fee @ \$35 \$ _____ per horse
- USEF Competition/Drug Fees, \$23 \$ _____ per horse
- CA Drug Fee \$5 \$ _____ per horse
- USEF Show Pass Fee @ \$45 \$ _____ Rider/owner
- Incomplete Entry \$ _____ Up to \$20
- AHA Single Event @ \$35/per show \$ _____ per owner/rider
- Post Entry Fee @ \$5 \$ _____ per class
- Late Entry \$20 \$ _____ per horse
- Returned Check Fee \$35 \$ _____

MANDATORY FEES - ARABIAN / HA / AA ONLY	
AHA resolution 9-90 @ \$5	\$ _____ per horse
AHA Results Fee @ \$5	\$ _____ per horse

- RV \$45 per night \$ _____ per night
- Dry Camping \$20 \$ _____ per night
- Entries post marked by 5/19 \$ _____ \$5 Discount
- Golden Snaffle Sponsorship \$35 _____
- Silver Spur Sponsorships \$75 \$ _____
- Silver Buckle Sponsorship \$100 \$ _____
- Total Entry \$ _____**

MAKE CHECK PAYABLE TO: Gold Coast A.H.A.

MAIL TO: Jan Dunlap
31942 Fritz Dr.
Exeter, CA 93221
(559) 571-0581

AHA ENTRY AGREEMENT

I have read the rules concerning competitions as printed in the Arabian Horse Association (AHA) Handbook / Directory and Competition Prize List and agree to be bound by and subject to those Rules.

AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION This document waives very important legal rights. Read it carefully before signing.

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

I AGREE that I choose to participate voluntarily in this Competition, as a rider, driver, handler, lessee, owner, agent, coach, trainer, junior exhibitor, or as a parent or guardian of a junior exhibitor. **I AM FULLY AWARE AND ACKNOWLEDGE THAT HORSE SPORTS AND PARTICIPATION IN THIS COMPETITION INVOLVE SERIOUS RISK OF HARM INCLUDING, BUT NOT LIMITED TO, RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN, AND SUFFERING, AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF HARM TO ME, MY HORSE OR MY PROPERTY.**

I AGREE for myself, my heirs, executors, administrators, successors and assigns to release AHA, the Competition, the facilities leased by the Competition and the owner(s) of the facilities, and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me to the fullest extent permitted by law that arises out of or relates in any way to the Competition and my participation in the Competition INCLUDING, BUT NOT LIMITED TO, DAMAGES, LOSS, OR INJURY RESULTING FROM ANY ACTS, FAILURE TO ACT, NEGLIGENCE OR NEGLECT OF OTHER ENTRANTS, THE RELEASED PARTIES, THEIR CONTRACTORS OR INVITEES, as well as for theft, vandalism, fire, other casualty damage, or damage arising out of any defects in the premises.

I AGREE to indemnify and hold harmless (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorneys fees) of whatsoever kind and nature, which may be asserted against or incurred by any of them as a result of (1) my participation in the Competition or (2) any act, failure to act, or neglect (a) by me, my agents, employees, riders, handlers, trainers, coaches, drivers, contractors or invitees, or (b) by any animal owned or exhibited by me or in my custody or control.

I AGREE and represent that I am qualified and eligible to enter and/or participate in the Competition, and every horse I am entering is qualified and eligible as entered.

I AGREE to accept AS FINAL any decision of AHA, the Show Commission or Show Officials concerning my qualification or the qualification of my horse to enter the Competition or any results of the Competition, except to the extent that the Rules of AHA, the Competition, CEF or USA Equestrian permit a protest or hearing of such decisions. Should a hearing be requested, I agree to accept AS FINAL the decision of the particular hearing body. I agree to release, hold harmless and not to sue AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Show Commission, Show Officials or any hearing body that relates to my qualifications or my horse(s)' qualifications to enter the Competition or any results of the Competition.

I AGREE that AHA has the sole right to control, sell, supervise or give away (or assign to others the right to do so) the exclusive rights to broadcast, televise, reproduce, transmit and disseminate all or part of this event, and I agree that AHA may use or assign, in any way AHA sees fit, photographs, films, videos, audios, cablecasts, 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 AHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way which implies endorsement of any company, product, product category or service. 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.

By signing below as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions, and further agree to assume all of the obligations of this AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child.

This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain effect.

Federation entry agreement

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of this Competition. I agree to be bound by the Bylaws and Rules of the Federation and 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, the Federation, 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 Federation and/or the 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, sport, or the Federation. 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 Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

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 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, vaultor, 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.

MUST BE SIGNED IN AT LEAST 3 PLACES 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

Owner -** Mandatory	No Junior Signatures	Print Name	Signature X
Trainer or Custodian of horse @ show -** Mandatory	No Junior Signatures	Print Name	Signature X
	Adult Owner must sign if no trainer		
Rider 1 - ** Mandatory	No Junior Signatures	Print Name	Signature X
Rider 2 - ** Mandatory	No Junior Signatures	Print Name	Signature X
Rider 3 -** Mandatory	No Junior Signatures	Print Name	Signature X
Coach - (if applicable) USEF #		Print Name	Signature X
Print Minor Name Here		Print Parent/Guardian Name Here	Signature X
Print Minor Name Here		Print Parent/Guardian Name Here	Signature X
***** EMERGENCY PHONE NUMBER FOR EXHIBITOR			

AHA or USEF/EC Membership is not required for Parents/Guardians signing for minors.

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____ (*Participant*), acknowledge that I have voluntarily applied to participate in the following activities at the **Santa Cruz County Fairgrounds**:

Gold Coast Arabian AHA Coast Classic Horse Show - June 6 -9, 2019

I AM AWARE THAT THE ABOVE DESCRIBED ACTIVITIES ARE HAZARDOUS ACTIVITIES, AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE.

I VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE: _____

PARENT OR GUARDIAN'S INITIALS (if under 18): _____

As consideration for being permitted: by the Fairgrounds, the County of Santa Cruz, and the State of California to participate in these activities and use their facilities, I hereby agree that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives will not make claim against, sue or attach the property of the Fairgrounds, the County, or the State of California or any of their affiliated organizations for injury or damage resulting from the negligence or other acts, however caused, by any director, employee, agent, or contractor of the Fairgrounds, the County, or the State of California or any of their affiliated organizations as a result of my participation in the activities described above. I forever lease the Fairgrounds, the County, and the State of California and any of their affiliated organizations from any and all action, claims; or demands that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives now have or may hereafter have for injury or damage resulting from my participation in the activities described above.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE FAIRGROUNDS, THE COUNTY, AND THE STATE OF CALIFORNIA AND/OR THEIR AFFILIATED ORGANIZATIONS AND SIGN IT OF MY OWN FREE WILL.

Executed at _____, California on _____ 2019.

PARTICIPANT/RELEASOR:

PARENT OR GUARDIAN:

Address: _____

Address: _____

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.

