



IALHA NATIONAL CHAMPIONSHIP HORSE SHOW

OCTOBER 10 – 14, 2017

DEADLINE SEPTEMBER 10, 2017

ENTRIES MAY BE

EMAILED [jbuddin@earthlink.net]

HORSE BACK # _____

ENTRY # _____

CK # _____ Amt: \$ _____

HORSE: _____	REG# _____	DOB _____	SEX: _____	COLOR: _____
BREED OF HORSE: _____	BREEDER: _____	HORSE USE# _____		
SIRE: _____	Dam: _____			
HORSE USDF # _____				

OWNER (from Horse Papers): _____	Phone # _____	Cell # _____
Owner of Farm: _____	USEF/CE #: _____	
Address (City/State/Zip): _____		
IALHA #: _____	Exp. Date: Mo _____ Day _____ Year _____	USEF/CE #: _____ USDF: _____

TRAINER (ADULT): _____	Phone # _____	Cell # _____
Address (City/State/Zip): _____		
Amateur: <input type="checkbox"/> YES <input type="checkbox"/> NO		
IALHA #: _____	Exp. Date: Mo _____ Day _____ Year _____	USEF/CE #: _____ USDF: _____

RIDER/HANDLER: _____	DOB: _____	Age: _____	<input type="checkbox"/> Jr <input type="checkbox"/> Amat <input type="checkbox"/> Pro
Address (City/State/Zip): _____			
IALHA #: _____	Exp. Date: Mo _____ Day _____ Year _____	USEF/CE #: _____	USDF: _____
List of Classes by Number: _____			CLASS FEES TOTAL: \$ _____
List of Classes by Number: _____			

RIDER/HANDLER: _____	DOB: _____	Age: _____	<input type="checkbox"/> Jr <input type="checkbox"/> Amat <input type="checkbox"/> Pro
Address (City/State/Zip): _____			
IALHA #: _____	Exp. Date: Mo _____ Day _____ Year _____	USEF/CE #: _____	USDF: _____
List of Classes by Number: _____			CLASS FEES TOTAL: \$ _____
List of Classes by Number: _____			

RIDER/HANDLER: _____	DOB: _____	Age: _____	<input type="checkbox"/> Jr <input type="checkbox"/> Amat <input type="checkbox"/> Pro
Address (City/State/Zip): _____			
IALHA #: _____	Exp. Date: Mo _____ Day _____ Year _____	USEF/CE #: _____	USDF: _____
List of Classes by Number: _____			CLASS FEES TOTAL: \$ _____
List of Classes by Number: _____			

INCLUDE THE FOLLOWING & CHECK OFF:

- _____ Horse Papers _____ Lease or Contract (necessary for pre-entry fee consideration)
- _____ Copy of Membership Cards for Owner _____ Trainer _____ all Riders _____ (necessary for pre-entry fee consideration)
- _____ Signatures (Minimum of 3) on Waiver Sheet

INCLUDE THE FOLLOWING & CHECK OFF:

- _____ Horse Papers _____ Lease or Contract (necessary for pre-entry fee consideration)
- _____ Copy of Membership Cards for Owner _____ Trainer _____ all Riders _____ (necessary for pre-entry fee consideration)
- _____ Signatures (Minimum of 3) on Waiver Sheet

ACKNOWLEDGEMENT EMAIL (Please print legibly): _____

STALL WITH: _____

PAYMENT MAY BE MADE BY CHECK, CASH OR CREDIT CARD (if paid by Credit Card, a receipt will be sent when entries are processed).

CREDIT CARD AUTHORIZATION: Visa Master Card American Express

Card No. _____ **Exp. Date** _____ **CVV No.** _____

Name on Card: _____

Billing Address: _____

E-Mail Address (for receipt) _____

Cardholder Signature: _____

TOTAL CLASS FEES: _____

SHOW FEES:

- _____ Stall Fee @ \$200 _____
- _____ Tack Stall & Groom Room Fee (no bedding provided) @ 200 _____
- _____ Early Stalling Fee @ \$25 per stall _____
- _____ Office Fee \$50 (per horse) _____
- _____ PHOTOGRAPHER FEE per horse @\$25 _____
- _____ Post Entry Fee (after Sept 10) @ \$50 _____
- _____ USEF Drug Fee per horse @ \$16 _____

OTHER FEES:

- _____ IALHA Non-Member Fee @ \$25 _____
- _____ IALHA Assoc. Member Fee @ \$50 _____
- _____ IALHA Membership Fee @ \$150 _____
- _____ USEF Show Pass Fee @ \$30 _____ (Non-Member Fee)
- _____ Credit Card Fee @ \$5(per authorization) _____
- _____ Sponsorship _____
- _____ Class Transfer/Substitution @ \$25 _____

TOTAL FEES: _____

Make Check Payable To: IALHA
DEADLINE: Must be postmarked by
September 10, 2017

Do not send certified return receipt – it slows up delivery

SEND TO:
JEAN BUDDIN
P O BOX 310423
NEW BRAUNFELS, TX 78131
PHONE: 228-238-1133
FED EX/ USP 1640 Dustin Cade Drive
New Braunfels, TX 78163
jbuddin@earthlink.net
Please do not send Certified –
return receipt

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, Vaultler 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 (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, vaultler, 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.

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.

RIDER/DRIVER/HANDLER/
VAULTER/LONGEUR(mandatory) (mandatory)

Signature: _____

Print Name: _____

OWNER/AGENT

Signature: _____

Print Name: _____

TRAINER (mandatory)

Signature: _____

Print Name: _____

COACH (if applicable)

Signature: _____

Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultler/Longeur is a minor) _____

Print Parent//Guardian Name: _____

Emergency Contact Phone No. _____

Is Rider/Driver/Vaultler a U.S. Citizen: ____Yes ____No