

(CLUB LOGO - if desired)

SHOW NAME
SHOW DATE

SEND TO:
Show Secretary Name
Address/City/State/Zip
Telephone

PLEASE TYPE OR PRINT/ONLY ONE OWNER PER ENTRY FORM. All entries must be complete. Enclose correct fees, copies of horse registration papers, purchase contract (if applicable), USEF/EC membership cards, amateur certification (if applicable), AHA Competition level membership cards for each rider, driver, handler, trainer and owner.

Form for the first horse entry, including fields for Name of First Horse, Reg. No., DOB, Sex, Color, Height, Sire, Dam, Horse USDF #, and a table for Class #, Rider/handler, and Entry Fees.

(Circle appropriate letter for rider/handler listed below.)

Form for the second horse entry, including fields for Name of Second Horse, Reg. No., DOB, Sex, Color, Height, Sire, Dam, Horse USDF #, and a table for Class #, Rider/handler, and Entry Fees.

(Circle appropriate letter for rider/handler listed below.)

Form for the third horse entry, including fields for Name of Third Horse, Reg. No., DOB, Sex, Color, Height, Sire, Dam, Horse USDF #, and a table for Class #, Rider/handler, and Entry Fees.

(Circle appropriate letter for rider/handler listed below.)

TOTAL CLASS FEES \$

Each person signing this entry form acknowledges that he/she has read the front and reverse of this 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 OWNERS, TRAINERS, RIDERS, DRIVERS & HANDLERS MUST SIGN ON THE BACK. Minor entrants must also have parent/guardian signature(s) on the back.

Stalls @ \$

Tack Rooms @ \$

OWNER (as appears on reg. papers or contract)

Office Fee \$

Name \_\_\_\_\_ AHA # \_\_\_\_\_

USEF Fees @ \$15 per horse (includes \$7 Drug & Medication fee) \$

Address \_\_\_\_\_ USEF/EC # \_\_\_\_\_

AHA Single Event Member Fee @ \$35 per person \$

City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

USEF Non-Member Fee @ \$30 \$

Coach \_\_\_\_\_ AHA & USEF/EC #'s \_\_\_\_\_

Resolution 9-90 (Education) @ \$3 (Mandatory per horse) \$

Trainer \_\_\_\_\_ AHA # \_\_\_\_\_

Cattle Fee \$

Address \_\_\_\_\_ USEF/EC # \_\_\_\_\_

Post Entry Fee @ \$

City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

Other \$

Form A: Rider/Driver/Handler Name \_\_\_\_\_ AHA # \_\_\_\_\_ USEF/EC # \_\_\_\_\_

Form B: Rider/Driver/Handler Name \_\_\_\_\_ AHA # \_\_\_\_\_ USEF/EC # \_\_\_\_\_

Form C: Rider/Driver/Handler Name \_\_\_\_\_ AHA # \_\_\_\_\_ USEF/EC # \_\_\_\_\_

ENCLOSED TOTAL FEES \$

Amateur Owner Relationship to Horse Owner \_\_\_\_\_

MAKE CHECK PAYABLE TO:

Dressage Information - Owner USDF # \_\_\_\_\_ Rider USDF # \_\_\_\_\_

STABLE WITH \_\_\_\_\_

ENTRIES CLOSE

(Send request for joint stabling in the same envelope)

FOR OFFICE USE ONLY

EC WAIVER - I hereby certify that every horse, rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the Constitution and Rules of the Equine Canada at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless the EC, the competition, their officials, organizers, agents, employees and their representatives. (EACH OWNER, TRAINER, RIDER, DRIVER, HANDLER AND THEIR PARENTS/GUARDIANS IF MINORS MUST SIGN ON BACK.)