

MINNESOTA STATE FAIR ~ AUG. 27 - SEPT. 7, 2009

ENGLISH HORSE ENTRY FORM *(one form per horse)*

OFFICE USE ONLY - DO NOT WRITE IN THIS BOX

Exhibitor number	Control number
Horse number	<input type="checkbox"/> <i>W-9 on file</i>

I hereby certify that every horse and rider is eligible as entered and agree to be subject to the Minnesota State Fair rules and regulations as listed in the premium book, and all applicable provisions of the Minnesota Statute 37. I further agree to hold the Minnesota State Fair, its Horse Show and any other affiliated organizations harmless for any and all damages sustained for any reason whatsoever, and agree to be responsible for any and all damages that may occur to be caused by any animal or vehicle exhibited or owned by me.

Entries close
MONDAY JULY 27
Must be postmarked by above date
 checks payable to Minnesota State Fair

Or enter **ON-LINE** at
www.mnstatefair.org

Name of Horse	
Registration #	Foaling date
Horse ID # USEF/USHJA	Sex
Color	Breed
Height	Measuring card

COMPETITION - HORSES
MINNESOTA STATE FAIR
 1265 SNELLING AVE. N.
 ST. PAUL, MN 55108
 651-288-4417
Monday - Friday,
8:00 a.m. - 4:30 p.m.
 Additional entry forms and premium books
 may be downloaded from the Minnesota
 State Fair Web site, www.mnstatefair.org

Owner Name		
USEF/USHJA #	AHA #	ASHA #
Address		
City	State	Zip
Phone <i>(include area code)</i>		
E-mail		

A completed W-9 form must be submitted with EACH exhibitor entry. Include a current copy of the Coggins test for each horse.

EXHIBITORS CANCELING ENTRIES AFTER THE OFFICIAL DATE FOR THE CLOSING OF ENTRIES WITHOUT A VETERINARIAN CERTIFICATE SHALL FORFEIT THEIR ENTRY & STABLING FEES.

Applications for USEF membership may be obtained from the Horse Show manager's office during the fair.

Class #	Entry Fee	Rider/Driver/Handler Name <i>(print name)</i> Is Rider/Driver/Handler a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	Address <i>(required for Equitation/Showmanship)</i>
	\$	City State Zip
	\$	Date of Birth <i>(if under 18)</i> Rider/Driver/Handler USEF/USHJA #
	\$	Youth/Amateur DOB Rider/Driver AHA # Rider/Driver ASHA #
	\$	Phone <i>(include area code)</i> Emergency Phone <i>(include area code)</i>
Total entry fees	\$	Signature <i>(if under 18, Parent/Guardian must sign)</i>
USEF fee <i>(per horse ~ includes \$7 drug fee)</i>	\$ 15.00	Owner signature
USEF non-member fee \$30.00 <i>(per person)</i>	\$	Trainer signature <i>(Parent or guardian, if no trainer)</i>
USHJA non-member fee \$30.00	\$	Trainer USEF/USHJA # Trainer AHA # Trainer ASHA #
AHA education fee \$3.00 <i>(per horse)</i>	\$	Coach signature <i>(if applicable)</i>
AHA single event fee \$30.00 <i>(per person)</i>	\$	Coach USEF/USHJA # Coach AHA # Coach AHSA #
Grand Total	\$	

OFFICE USE ONLY - LAST

FIRST

EX #

USEF Entry Agreement

I have read the United States Equestrian Federation, Inc. (The "Federation") Entry Agreement (GR 906.4) 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.

USEF 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, Minnesota State Fair to the following:

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, lessee, owner, agent, coach, vaulter, trainer, longeur, 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 Articles GR 801 and EV 114, 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 THIS FORM, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank, including the AHA Entry Agreement.

AHA ENTRY AGREEMENT – Regional and Local Show

I have read the rules concerning competitions as printed in the Arabian Horse Association (AHA) Handbook and Directory 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, DAMAGES, 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, Equine Canada or U.S. Equestrian Federation 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.

Rider/Driver/Handler Name (print name) Is Rider/Driver/Handler a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Address (required for Equitation/Showmanship)		
City	State	Zip
Date of Birth (if under 18)	Rider/Driver/Handler USEF/USHJA #	
Youth/Amateur DOB	Rider/Driver AHA #	Rider/Driver ASHA #
Phone (include area code)	Emergency Phone (include area code)	
Signature (if under 18, Parent/Guardian must sign)		

Rider/Driver/Handler Name (print name) Is Rider/Driver/Handler a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Address (required for Equitation/Showmanship)		
City	State	Zip
Date of Birth (if under 18)	Rider/Driver/Handler USEF/USHJA #	
Youth/Amateur DOB	Rider/Driver AHA #	Rider/Driver ASHA #
Phone (include area code)	Emergency Phone (include area code)	
Signature (if under 18, Parent/Guardian must sign)		