Summer's End Horse Show September 9-12, 2021

CLOSING DATE: August 26, 2021

Billing Address/City/State/Zip ___

MAIL TO: Carlie Evans 22806 W. Newberry Rd. Newberry, FL 32669 352-215-0710 sehorseshows@gmail.com

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|------------------------------|--|-----------------------|----------------|------------------------|----------------|--|------------|-------------------------|---|------------------------|--|------------------------|---------|---|--|----------------------|
| | | Horse Name | | | | | Re | eg. No. | DOB | Sex | | | Breed | | | |
| | | Sire | | | | | Da | am | | | | • | | | | |
| Class # | Rider/h A B | | 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 # | | ler/han | | Entry Fees: \$ | |
| Class # | Rider/h | | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | | ler/han | _ | Entry Fees: \$ | |
| Class # | A B | | Class # | A B C | Class# | A B C | Class # | A B C | Class# | A B C | Class # | 1 | В | | Littly rees. 🔾 | |
| | | | te letter for | rider/handler listed | d below) | , , , , , , , , , , , , , , , , , , , | | 7, 5 0 | | 77 0 0 | <u> </u> | / \ | | | <u> </u> | |
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| | | Horse | Name | | | | Re | eg. No. | | DOB | | Sex | < | | Breed | |
| | | Sire | | | | | Da | am | | | | | | | | |
| Class # | Rider/h | | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | | der/han | | Entry Fees: \$ | |
| | A B | | | A B C | | АВС | | A B C | <u> </u> | A B C | <u> </u> | _ | В | | | |
| Class # | Rider/h | | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | Rider/handler | Class # | | der/han | | Entry Fees: \$ | |
| | A B | | | A B C | | A B C | | A B C | | A B C | | A | В | С | | |
| Addres City/Si Coad City/Si | releases, in IERS, TRAII THE NAME THE NAME | ndemnifi NERS, RID | ation and c | consent as set forth | herein. Each | d the front and reverse n person agrees that th THE BACK. Minor entr | ne inform. | ation is accurate to th | e best of hi ardian sign AMHA #_ ASHA # _ Phone AMHA #_ ASHA # _ Phone | s/her knowledge. | (. | - - - - | | Stall Tack Office AMH (Mance Cam Post Bedde Daily (If she | RY FEES: Is @ \$150 Rooms @ \$150 Re Fee @ \$35/horse HA Judges Education Flatory: \$2/horse for Morganis per @ \$45/night Entry Fee @ \$15/hor. ding @ \$8.00/bale by Grounds Fee @ \$25 owing from trailer) TOTAL FEES: | \$\$ \$\$ \$\$ |
| B Rider/Driver/Handler Name: | | | | | | | | | | | Make checks payable to: FMHA or provide credit card information below. You may also make your secure online | | | | | |
| - NI | מכון טוועלו, | , manufel | .vaiifC | | | | | | ASHA#_ | | | | ļ | oayn | nent at www.FMI | HA.net. |
| eMail | address: _ | | | | | | | | STA | BLE WITH: | | | | | | |
| EQUESTR | IAN SPORTS II | NVOLVED INH | IERENT RISK AN | D THAT NO HELMET OR PR | OTECTIVE EQUIP | S ENTERED AND AGREE FOR M PMENT CAN PROTECT AGAINST minors must sign on back.) | | | | | | | | | | |
| Тора | ay by cr | edit ca | rd: | | - | DISCOVER | _ N | ame on card: | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| Card | Numbe | er | | | | E | хр: | | SN: | Signature | | | | | | |

SUMMER'S END HORSE SHOW ENTRY AGREEMENT

By entering and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulter or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the local rules of the Summer's End Horse Show as published in the official prize list. I I will accept as final the decision of the Horse Show Managers on any question arising under the Rules, and agree to release and hold harmless the competition, 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 FMHA or 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 or sport. 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.

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 FMHA and "Competition" as used herein includes the Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel and volunteers. 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 hold harmless and release the FMHA 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 FMHA 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 FMHA or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the FMHA 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 Competition Rules about protective equipment, 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 FMHA and the Competition.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federal and State Agriculture Laws, Competition Rules as stated in the official prize list 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 & TRAINER MANDATORY: | RIDER/DRIVER/HANDLER & TRAINER MANDATORY: | OWNER/AGENT (mandatory): | | | | | |
|--|--|--------------------------|--|--|--|--|--|
| Rider/Driver/Handler Signature | Rider/Driver/Handler Signature | Signature | | | | | |
| Rider/Driver/Handler Print Name | Rider/Driver/Handler Print Name | Print Name | | | | | |
| TRAINER Signature | TRAINER Signature | COACH (if applicable): | | | | | |
| TRAINER Print Name | TRAINER Print Name | Signature | | | | | |
| Parent/Guardian Signature if under 18 yrs | Parent/Guardian Signature if under 18 yrs | _ | | | | | |
| Print Parent/Guardian Name | Print Parent/Guardian Name | _ | | | | | |
| Emergency Contact Phone No. Is Rider/Driver/Handler a U.S. Citizen? Yes No | Emergency Contact Phone No. Is Rider/Driver/Handler a U.S. Citizen? Yes No | FOR OFFICE USE ONLY | | | | | |
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