



IALHA, IFHSA & PFHA ONLY

BACK NO.

FIESTA OF THE SPANISH HORSE

May 6 - 9, 2010 • Los Angeles Equestrian Center • Burbank, CA

Please type or print. **One horse per entry form.** All entries must be complete & must include correct fees, copies of horse registration papers, statement of ownership if purchased on contract, USEF/IALHA/IFHSA/PFHA membership card for each owner, USEF card for each rider/driver/handler & USEF Amateur card for each Amateur rider, driver & handler. Entries close and must be postmarked by April 23, 2010. Post Entries are accepted with penalty.

HORSE NAME	REG #	SEX	COLOR
BIRTH DATE	AGE	HT	USEF HORSE ID #

<input type="checkbox"/> Andalusian/Lusitano	Sire: _____	Breed of Other Parent: _____
<input type="checkbox"/> Half Andalusian/Lusitano	Dam: _____	Owner Association Member # _____
<input type="checkbox"/> Friesian	Breeder: _____	
<input type="checkbox"/> Part Bred Friesian <input type="checkbox"/> Paso Fino		

CLASS #	RIDER / DRIVER / HANDLER NAME	USEF #	IALHA #	IFHSA #	PFHA #	ENTRY FEE

ATTACH ADDITIONAL SHEET IF NECESSARY

MUST COMPLETE CHECK AND/OR CREDIT CARD INFO BELOW:

OPEN CHECK ENCLOSED Check #: _____
(MUST complete CC Authorization Below if Not Enclosing Open Check)

CHECK ENCLOSED FOR TOTAL SHOW FEES NOW DUE
Check #: _____ Amount: _____

CHARGE CREDIT CARD FOR: Show Fees And On File
 Visa Master Card Discover American Express

Credit Card Number: _____
Expiration Date: _____
Billing Address Zip Code _____ VCode _____
Cardholder Signature _____

OFFICE USE ONLY:

<input type="checkbox"/> USEF Card Received	<input type="checkbox"/> Breed Card Received
Date Received _____	
Signatures Needed: _____	

Please Stable With _____
Date & Time of Arrival _____

Make Checks Payable To: FIESTA OF THE SPANISH HORSE

Enclose COMPLETED Entry Form and required documentation WITH:

- Check in Full or CC Information for Total Amount Due
- Open Check or CC Authorization for Horse Show Office

And Mail to: Fiesta of the Spanish Horse • Attn: Roxanne Hood
P O Box 21022 • Glendale, CA 91221-5122

- _____ Total Entry Fees.....
- _____ Stalls/Tack Rooms @ \$135 (Wed-Sun, no first bedding).....
- _____ Office Fee @ \$15 per horse \$15
- _____ CA Drug Testing \$5 per horse
- _____ Post Entry Fee @ \$25 per horse.....
- _____ Late Fee @ \$5 per class
- _____ Early Arrival @ \$30 per stall/night
- _____ Grounds Fee No stall used \$35 per day/horse.....
- _____ Grounds Fee Horses Stabled at LAEC \$35 per horse
- _____ Class Sponsorships (\$50 regular • \$100 Champion)
- _____ RV Vehicles @ \$55 per day.....
- _____ Paso Fino Fee @ \$6 per horse
- _____ IALHA Non-Member Fee, Owner \$25/Horse
- _____ IALHA Non-Member Fee, Other Participants \$25/pp
- _____ \$25 Direct Donation to Cancer Research (Optional) \$25
- _____ Miscellaneous.....
- _____ USEF Fee \$15/horse (\$7 drug/research • \$8 USEF)
- _____ USEF Non-Member \$30/person (Sr. & Jr.).....
- _____ USEF Amateur Non Member \$30.....

TOTAL AMOUNT ENCLOSED

CONTINUED ON REVERSE

MUST COMPLETE INFORMATION ON BACK OF ENTRY

Even though this entry is paid in full, an open check, cash or credit card authorization must be given to the Show Secretary before entry numbers will be released.

COPIES OF REGISTRATION PAPERS MUST ACCOMPANY THIS ENTRY.

IALHA, IFHSA & PFHA ONLY

SIGNATURES REQUIRED IN FOUR (4) PLACES BELOW

Unsigned entries will not be accepted. Carefully read this agreement before signing.

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 the competition. I agree to be bound by the Bylaws and Rules of the Federation and 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, 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 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, Fiesta of the Spanish Horse / Fiesta Dressage, to the following:

- 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 release the Federation and the Competition, Fiesta of the Spanish Horse / Fiesta Dressage, at The Los Angeles Equestrian Center ("LAEC"), 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, Fiesta of the Spanish Horse / Fiesta Dressage, and the LAEC, 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 GR801 and 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 assume all of the obligations of this Release on the child's behalf.
- I AGREE that "the Federation", Competition, Fiesta of the Spanish Horse / Fiesta Dressage, and The Los Angeles Equestrian Center (LAEC), as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.
- 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.
- I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

BY SIGNING BELOW, I FURTHER AGREE to be bound by all applicable federation rules and all terms and provisions of this entry blank.

X _____ Rider/Driver/Handler/Vaultor/Longeur	X _____ Trainer's Signature (Mandatory) (if no trainer owner must sign)	X _____ Owner/Agent Signature (Mandatory)	X _____ Coach (if applicable)
Print Name: _____ Address / City, State, Zip: _____ _____	Print Name: _____ Address / City, State, Zip: _____ _____	Print Name: _____ Address / City, State, Zip: _____ _____	Print Name: _____ Address / City, State, Zip: _____ _____
Phone: _____ Email: _____ USEF# _____ IFSHA/PFHA/IALHA# _____	Telephone: _____ Email: _____ USEF# _____ IFSHA/PFHA/IALHA# _____	Telephone: _____ Email: _____ USEF# _____ IFSHA/PFHA/IALHA# _____	Telephone: _____ Email: _____ USEF# _____ IFSHA/PFHA/IALHA# _____

Is Rider / Driver / Vaultor a U.S. Citizen: _____ Yes _____ No

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

Print Parent/Guardian Name: _____ Emergency Contact Phone No. _____

If more than one Rider/Driver/Handler attach signed copies of this page.