

ASHAV September 28-October 1, 2022

Entries close September 13, 2022

One Horse per entry Blank
Make checks payable to:
ASHAV

Mail To: ASHAV
956 Hill Rd.
Paris, KY 40361

859-457-0841/loriluvshorses@yahoo.com

PLEASE DO NOT SEND ENTRIES BY SIGNATURE REQUIRED DELIVERY OR THEY WILL NOT BE PROCESSED

Emailed entries will be assessed a \$10/entry fee

Shavings-contact the VA Horse Center at 540-464-2966

Included with this entry:

Registration papers []

Membership cards:

ASHA [] AHHS [] ARHPA [] UPHA [] Coggins []

PLEASE PRINT OR TYPE (Fill out completely)

Owner _____ USEF # _____ ASHA# _____ AHHS# _____ ARHPA# _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____ email _____

Trainer _____ USEF # _____ ASHA# _____ AHHS# _____ ARHPA# _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____ email _____

Stable Name _____

Rider/Driver/Handler _____ USEF # _____ ASHA# _____ AHHS# _____ ARHPA# _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____ email _____

Make premium checks payable to: _____ Social Security /Tax ID _____

Address _____ City/State/Zip _____

Office use	Horse Name			Registration #			M / G / S
Class #							Total Fees
Entry Fee							
	TOTAL ENTRY FEES						\$
#	STALLS @ \$175 EACH						\$
#	GROUND FEE (Horses showing not using a stall) @ \$20						\$
#	OFFICE FEE PER ENTRY \$40						\$ 40.00
#	HORSE SHOW SPONSORSHIP						\$
#	BOX SEATS (6 seats \$100; 12 seats \$125; 18 seats \$175)						\$
	TOTAL REMITTANCE						\$

A 4% fee will be assessed for CC processing fees CARD#: _____ EX DATE _____

CARD HOLDER ZIP: _____ SECURITY CODE _____

CARD HOLDER NAME (please print) _____

CARD HOLDER SIGNATURE _____

Entries must be accompanied with some form of payment. Any check returned for insufficient funds or stop payment will be assessed an additional \$50 fee. Any credit cards that are declined will be assessed a \$10 fee each time an additional/the same card is run until payment is approved.

WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of American Saddlebred Horse Association ("ASSOC.") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, lessee, owner, agent, coach, official, trainer or volunteer) in a ASSOC. related activities; I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "**Agreement**"):

A. RULES AND REGULATIONS: I hereby agree to be bound and abide by the rules, regulations, and policies of American Saddlebred Horse ASSOC. as published and as amended from time to time.

B. ACKNOWLEDGMENT OF RISK: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any ASSOC Event involves risks and dangers including, with-out limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the ASSOC Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks").

EQUINE ACTIVITY LIABILITY ACT WARNING:

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK.

Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

C. ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the Assoc. Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any Assoc. Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any Assoc. Event.

D. WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY: In conjunction with my participation in any Assoc. Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: ASSOC clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any ASSOC. Event; any charity or other beneficiary which may benefit from the ASSOC. Event; the owners, managers, or lessors of any facilities or premises where a ASSOC. Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (**Individually and Collectively, the "Released Parties" or "Event Organizers"**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in anyway to my participation in the ASSOC. Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

E. COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any ASSOC Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

PARTICIPANT:

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR/OFFICIAL/STAFF/VOLUNTEER
(mandatory)

OWNER (mandatory)

Signature: _____

Print Name: _____

COACH (if applicable)

Signature: _____

Print Name: _____

TRAINER (mandatory)

Signature: _____

Print Name: _____

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

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

