



**Wild Rose Arabian & Half/Anglo Arabian
Horse Show
July 1-3, 2011
Amberlea Meadows, Edmonton, AB**

MAIL ENTRY FORM & FEES TO:
Wild Rose Show,
Diane Dyck,
5205 43 Ave, Leduc, AB T9E 5A6
AHA # 111710796 EC Bronze Competition #800474

PLEASE TYPE OR PRINT/ONLY ONE OWNER PER ENTRY FORM. All entries must be complete. Enclose copies of horse registration papers (both sides), purchase contract (if applicable), EC/USEF membership cards, amateur certification (if applicable), AHA membership cards for each rider, handler, owner and correct fees. *For more than three horses please request additional forms or make photocopies*

	Name of 1 st Horse		Reg. No	DOB	Sex	Color	Entry Fees
	Sire		Dam				
Rider/driver/handler	AHA #		Class #'s				\$
Address	EC/USEF						
Rider/driver/handler	AHA #		Class #'s				\$
Address	EC/USEF						

	Name of 2 nd Horse		Reg. No	DOB	Sex	Color	Entry Fees
	Sire		Dam				
Rider/driver/handler	AHA #		Class #'s				\$
Address	EC/USEF						
Rider/driver/handler	AHA #		Class #'s				\$
Address	EC/USEF						

Each person signing this entry form acknowledges that he/she has read the front & reverse of the 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.

OWNER (as appears on registration papers or contract) **MINORS MUST NOT SIGN BUT MUST HAVE AN ADULT SIGNATURE**

Name _____ AHA # _____

Address _____ EC/USEF # _____

City, Province _____ Phone _____

Postal Code _____ email _____

TRAINER shall be signed by the trainer or person responsible for the care, training, custody & performance of the horse

Name _____ AHA # _____

Address _____ EC/USEF # _____

City, Prov., P.C. _____ Phone _____

Amateur Owner Relationship to Horse Owner _____

STABLE WITH - _____

Use common stabling name. Requests for joint stabling must be sent in the same envelope

Total Class Fees \$ _____

Horse Stalls @ \$75 \$ _____
Jul 1-3, 2011

Tack Rooms @ \$75 \$ _____
Jul 1-3, 2011

Day Stall \$ _____
@\$35 per Day no overnight

Haul In Fee \$ _____
(Per Horse/No Stall \$25 per day)

Office Fee \$ _____
\$15 per horse

Drug Fee \$ _____
\$3.50 per horse

Number Fee \$ _____
\$3.00 per horse

EC Temp/Single Event \$ _____
see 2010 member info

AHA Single Event \$ _____
Fees @ \$40 Canadian

AHA RES. 9-90 \$ _____
@ \$4.00 per horse

AHA Show Recog. \$ _____
fee @ \$4.00 per horse (New)

Late Fee \$ _____
\$20 Per Entry After

June 7, 2011

TOTAL FEES ENCLOSED
\$ _____

Make cheques payable to
Wild Rose Arabian Horse Association

FOR OFFICE USE ONLY	
Cheque # _____	
Amount of Cheque \$ _____	
Name on Cheque _____	

**REVERSE SIDE OF ENTRY FORM MUST BE
COMPLETED AND SIGNED.**

ENTRIES CLOSE - June 7, 2011

Assumption of Risk, Release and Indemnification

This document waives very important legal rights. Read it carefully before signing.

Equine Canada NOTICE: Every entry at a recognized Show shall constitute an agreement that the person making it, owner, lessee, trainer, manager, agent, coach, driver, rider, and the horse shall be subject to the Constitution and the Rules of Equine Canada and the local rules of the Show. Every horse, rider, and/or driver is eligible as entered and that the owner and any of his representatives are bound by the Constitution and Rules of Equine Canada, and the Show will accept as final the decision of the Hearing Committee on any question arising under said rules and agree to hold the Show, Equine Canada, their affiliates, officials, directors and employees harmless for any action taken. "I certify that I am the owner or duly authorized agent for the owner of the horse(s) listed, that I have read and am familiar with the Prize List (announcements) published in connection with this Show and agree to be bound by all rules

AHA Entry Agreement – Regional and Local Shows

I have read the rules concerning competitions as printed in the Arabian Horse Association (AHA) Handbook/Directory & Competition Prize List and agree to be bound by and subject to those Rules.

In consideration of being permitted to participate in this Competition, I agree as follows:

I AGREE 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 RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN AND SUFFERING AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF LOSS OR HARM TO ME, MY HORSE OR MY PROPERTY.

I AGREE for myself, my heirs, executors, administrators, successors and assigns I hereby release EQUINE CANADA, AHA, the Competition, the Facilities leased by the Competition, the owner(s) of the facilities and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me 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 ACT, 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 the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including legal fees on a solicitor and own client, full indemnity basis) 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 Equine Canada, 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, or Equine Canada 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 Equine Canada, its affiliates, AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of Equine Canada, 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 Assumption of Risk, Release and Indemnification personally and on behalf of the child. **In the event that my child participates in an Equine Canada sanctioned competition where approved headgear is required for juniors, he/she will wear a properly fitted ASTM/SEI or BSI approved helmet. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions.**

This Assumption of Risk, Release and Indemnification is governed by the Laws of the Province in which the competition is held and is intended to be interpreted as broadly as possible in favor of the Released Parties. I agree that exclusive jurisdiction and venue (place) for any legal action against any of the Released Parties shall be in the Supreme Court in the Province in which the competition is held. If any part of this agreement is determined to be unenforceable, all other parts shall remain effect.

BY SIGNING BELOW, I AGREE TO BE BOUND BY ALL APPLICABLE FEDERATION RULES AND ALL TERMS & PROVISIONS OF THIS ENTRY FORM

NOTE: Address is very important for all Riders, Drivers, Handlers that are not listed on the front of this entry form. Please complete in full		
Rider/Driver/Handler (Mandatory)	Owner/Agent (Mandatory)	Trainer (Mandatory)
Signature:	Signature:	Signature:
Print Name & Address	**Print Name & Address**	Print Name & **Address**
Rider/Driver/Handler (Mandatory)	If Rider/Driver/Handler is a MINOR (Mandatory)	Coach (If Applicable)
Signature:	Parent/Guardian Signature:	Signature:
Print Name & Address	**Print Parent/Guardian Name & Address**	Print Name & Address

MINOR ENTRANT: NAME _____

DATE OF BIRTH _____

Address: _____

Telephone _____

MINOR ENTRANT: NAME _____

DATE OF BIRTH _____

Address: _____

Telephone _____

Signature of Parent/Guardian _____ Emergency Contact Number: * _____ *****