



Spooktacular Weekend Show AVS Entry Form

Include a copy of horse registration papers & copy of owner/trainer/exhibitor

AHA Competition Membership cards if applicable

SEND TO:
Katie Barrowcliff
1330 44th Street, Unit A
Marion, IA 52302

Dressage entries close Oct. 26th

	Horse's Name				Reg. No.		DOB MM/DD/YY	Sex	Color
	Breed		Sire		Dam				
Rider 1	Classes								
	Name				DOB MM/DD/YY		Amateur Certificate Yes No		
AHA #				Amateur Relationship to horse owner					
Address				City		State		Zip	
Rider 2	Classes								
	Name				DOB MM/DD/YY		Amateur Certificate Yes No		
AHA#				Amateur Relationship to horse owner					
Address				City		State		Zip	
Rider 3	Classes								
	Name				DOB MM/DD/YY		Amateur Certificate Yes No		
AHA#				Amateur Relationship to horse owner					
Address				City		State		Zip	

OWNER INFORMATION Owner name as it appears on registration papers/purchase contract

Name _____
 AHA# _____ WDAA# _____ Farm/Ranch _____
 Current Address _____ Phone _____
 City _____ ST _____ Zip _____
 Email _____

_____ Open Class Fee @ \$8.00 \$ _____
 _____ AHA Class Fee @ \$10.00 \$ _____
 _____ SHIH/ SHUS Class Fee @ \$20 \$ _____
 _____ Dressage/Western Dressage Tests @ \$25 \$ _____
 _____ Office Fee @ \$20 \$ _____
 _____ AHA Single Event Member Fee @ \$35/person/per show \$ _____
 _____ \$10 (Education 9-90 \$5+Results \$5)\$ _____
 _____ For Arabians only \$ _____
 _____ Class Sponsorships @ \$10.00 \$ _____
 _____ Box Stall @\$85/Weekend \$ _____
 _____ Extra Bedding @ \$9.00 \$ _____
 _____ Tack Stall @ \$70/Weekend \$ _____
 _____ Camping @ \$30/Night \$ _____
 _____ Post Entry Fee @ \$20 \$ _____
ENCLOSED TOTAL FEES \$ _____

TRAINER INFORMATION (must be filled out, if there is no trainer, owner may write same in trainer information)

Name _____
 AHA# _____ USEF/EC# _____ USDF# _____
 Address _____ Phone _____
 City _____ ST _____ Zip _____
 Email _____

Stable with _____

Make Check Payable to: laAHA

Please read and complete release

ASSUMPTION OF RISK, RELEASE AND HOLD HARMLESS AGREEMENT

I agree as follows by signing this entry:
 I choose for myself (or as parent or guardian to permit a junior exhibitor) to participate voluntarily in this competition. I AM FULLY AWARE AND ACKNOWLEDGE THAT PARTICIPATION IN THIS COMPETITION INVOLVES SERIOUS RISKS OF HARM, INCLUDING PERSONAL INJURIES, DEATH AND DAMAGES TO PROPERTY. I ASSUME ALL RISKS OF HARM AND DAMAGES TO ME, MY HORSE AND PROPERTY.
 I hereby RELEASE, INDEMNIFY AND HOLD HARMLESS (including from damages, costs and attorney fees) Arabian Horse Association, the Competition, the facilities, and all of their respective Agents, Servants, Employees and Volunteers (Collectively the "Released Parties") from any claims, relating to the competition and my participation in the competition, belonging to me, or legally caused by me or my Horse, for any kind of damages, losses, or injuries to myself, other persons, horses or property to the fullest extent permitted by law.
 I further agree to adhere to the rules set forth in the Arabian Horse Association One Day Show Rules & Guidelines and understand all decisions made by the judge are deemed final and can not be protested.

Owner -** Mandatory	No Junior Signatures	Signature X
Trainer or Custodian of horse @ show -** Mandatory	No Junior Signatures Adult Owner must sign if no trainer	Signature X
Rider 1 -** Mandatory	No Junior Signatures	Signature X
Rider 2 -** Mandatory	No Junior Signatures	Signature X
Rider 3 -** Mandatory	No Junior Signatures	Signature X