



**AHA Region One
50 Mile Endurance Championship
Saturday, May 20, 2017**

**SEND TO:
Jennifer Bishop
jbishop@att.net
Fax: 858-759-5362**

1. Please pay the AHA cross-entry fee online at www.sandiegoenduranceriders.com
2. Email or fax to Jennifer Bishop this completed entry form/AHA liability, a copy of horse registration papers, copy of AHA membership Competition card, and proof of your 50 mile or greater qualifying rides by Sunday, May 14, 2017.
3. **Please print clearly.**

RIDER INFORMATION

AHA Membership # _____ Name _____ AERC # _____
 Address _____
 City _____ State/Prov. _____ Zip/Postal _____
 Home # _____ Work # _____ Fax # _____
 E-Mail _____ Date of Birth _____ / _____ / _____
Month Day Year
 Emergency Contact Name _____ Phone # _____ Relationship _____
 Medical Insurance Carrier _____ Phone # _____
 Signature of Rider _____ Date _____

HORSE ENTRY INFORMATION

Horse Registry _____ Registration # _____ Horse Name _____
 Date of Foaling _____ / _____ / _____ Sex _____ AERC # _____ Sweepstakes: Yes No
Month Day Year

HORSE OWNER INFORMATION (Required even if same as rider.)

AHA Membership # _____ Name _____ AERC # _____
 Address _____ E-Mail _____
 City _____ State/Prov. _____ Zip/Postal _____
 Home # _____ Work # _____ Fax # _____
 Signature of Owner _____ Date _____

QUALIFYING RIDES

	Date	Ride Name	Sanctioning Body	Location	Mileage
1					
2					
3					
4					

*If additional space is required, you may attach another sheet.

AHA ENTRY AGREEMENT – Regional and Local Ride

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

AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION

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

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

I AGREE that 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 HARM TO ME, MY HORSE OR MY PROPERTY.**

I AGREE for myself, my heirs, executors, administrators, successors and assigns to **release** AHA, the Competition, the facilities leased by the Competition and 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 to the fullest extent** permitted by law 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 ACTS, 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 (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorneys fees) 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 AHA, the Ride Management Committee or Ride 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 or the Competition 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** AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Ride Management Committee, Ride 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 AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child.

This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain effect.

Rider/Driver/Handler (mandatory)	Owner/Agent (mandatory)	Trainer/Coach (mandatory)
Signature:	Signature:	Signature:
Print Name:	Print Name:	Print Name:

PERMISSION to RIDE for MINOR (under 18 yrs. of age)

I hereby consent to the entry of the named minor in this trail ride and certify that the foregoing representations and statements and that the same may be deemed a part hereof, and hereby accept responsibility thereunder for the participation of said minor.

Name of Minor:	Signature:
Birthdate of Minor:	Relationship: (parent or guardian)

SPONSORS for MINORS (under 16 yrs. of age)

Riders under the age of 16 must ride with an adult (21 yrs. old) sponsor.

Name of Sponsor:	Signature:
------------------	------------