

ONLY ONE (1) OWNER PER FORM

| OWNER | |
|--|-----------|
| Print Name of Legal Owner (Sign Liability Statement on Reverse Side) | |
| Street or P.O. Box of Owner or Agent | |
| City | State Zip |
| Owner's Email Address | |
| Phone No. of Owner | |
| USEF # | ASHA # |

**Oregon State Fair
Horse Show
USEF ENTRY FORM
(CIRCLE BREED)
Paso Fino, Saddlebred, Morgan,
Hackney, Roadster**

COMPLETE BOTH SIDES OF THIS FORM

September 3 - 5, 2021

**Oregon State Fair and Exposition Center,
Salem, Oregon
OR ONLINE @ www.HorseShowsOnline.com**

POST ENTRY FEE AFTER August 21, 2021

| TRAINER | |
|---|-----------|
| Print Trainer's Name (Sign Liability Statement on Reverse Side) | |
| Street or P.O. Box of Trainer | |
| City | State Zip |
| Trainer's Email Address | |
| Phone No. of Trainer | |
| USEF # | ASHA # |

| LEAVE BLANK | NAME OF HORSE (Class Number Under Name. One Class Per Square) | TOTAL FEES | DESCRIPTION | BREED REG # & USEF REC # | RIDER, DRIVER OR HANDLER |
|-------------|--|------------|-------------|-----------------------------|---------------------------------|
| | | | Sex: | BREED REG# | Name: |
| | | | DOB: | USEF REC# | Amatuer - Y/N Jr. Date of Birth |
| | | | Sex: | BREED REG# | Name: |
| | | | DOB: | USEF REC# | Amatuer - Y/N Jr. Date of Birth |
| | | | Sex: | BREED REG# | Name: |
| | | | DOB: | USEF REC# | Amatuer - Y/N Jr. Date of Birth |
| | | | Sex: | BREED REG# | Name: |
| | | | DOB: | USEF REC# | Amatuer - Y/N Jr. Date of Birth |

PLEASE SEND COPIES OF HORSE REGISTRATION PAPERS SHOWING PROOF OF OWNERSHIP, USEF MEMBERSHIP CARDS, ASHA CARDS AS APPLICABLE, AND PONY MEASUREMENT CARDS AS APPLICABLE TO BREED, WITH THIS ENTRY FORM.

| OFFICE USE ONLY |
|------------------------------------|
| AMT PAID _____ FOR #S _____ |
| CHECK # _____ RECEIPT _____ |
| _____ USEF MEMBERSHIP CARD |
| _____ REGISTRATION PAPERS |
| _____ ASSOCIATION MEMBERSHIP CARDS |

**MAKE ALL CHECKS PAYABLE TO:
OREGON STATE FAIR**

**NO ENTRIES ACCEPTED UNLESS
ACCOMPANIED BY CHECK IN FULL
**NO BLANK CHECKS WILL BE
ACCEPTED****

FOR MORE INFORMATION CALL:

**Ron Hood, Show Manager
831-524-5248**

**MAIL ENTRIES TO:
Oregon State Fair Horse Show
2330 17th Street NE
Salem, OR 97301**

ENTRY FEES \$ _____
 POST ENTRY FEE (PER HORSE - SEE RULE 1b.) () x \$ 15 \$ _____
 OFFICE FEES (PER HORSE) () x \$ 15 \$ _____
 STALLS, (horse or tack) refer to breed division for amount..... () x \$ \$ _____
ATTACH STALL RESERVATION SHEET
 EARLY ARRIVALS (PER DAY, PER STALL) see limit on days..... () x \$ 25 \$ _____
 Haul in Fee per horse, per day - horses not requiring stalls..... () x \$ 20 \$ _____

| | |
|--|----------|
| USEF FEE (\$23 per horse (\$15 drugs/meds - \$8 USEF)..... () x \$ 23 | \$ _____ |
| USEF SHOW PASS FEE (per person, NM fee)..... () x \$ 45 | \$ _____ |

TOTAL ENCLOSED \$ _____

Oregon State Fair Horse Show Entry Agreement

Every entry made on this entry blank shall constitute an agreement and affirmation that all participants (which shall include, without limitation, the owner, lessee, trainer, manager, agent, coach, driver, rider, handler and the horse) for themselves, their principles, representatives, employees and agents shall be subject to the rules of The State of Oregon, Oregon State Fair Council, Oregon State Fair and the Oregon State Fair Horse Show, and will accept as final the decision of the hearing committee on any question arising under said rules, and agree to hold the above, its officers, directors, and employees harmless for any action taken.

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, the Oregon State Fair Horse Show to the following:

- I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, 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 Competition, **The State of Oregon, Oregon State Fair Council, Oregon State Fair and the Oregon State Fair Horse Show**, 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 Competition.
- I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition.
- I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the **Competition, The State of Oregon, Oregon State Fair Council, Oregon State Fair and the Oregon State Fair Horse Show**, 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 understand that I am entitled to wear protective equipment without penalty and I acknowledge that the Competition 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 Competition, **The State of Oregon, Oregon State Fair Council, Oregon State Fair and the Oregon State Fair Horse Show**, 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 Competition 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.
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ALL EXHIBITORS MUST PAY ALL BALANCES AND RECEIVE A RECEIPT FROM THE SHOW OFFICE BEFORE LEAVING THE GROUNDS AT THE END OF SHOWING THEIR DIVISION, THIS WILL BE ENFORCED.

BY SIGNING BELOW, I FURTHER AGREE TO BE BOUND BY ALL APPLICABLE COMPETITION RULES AND ALL TERMS AND PROVISIONS OF THE OSF HORSE SHOW BOOK, AND THIS ENTRY BLANK

OWNER/AGENT (MANDATORY)

Adult Signature: _____

Print Name: _____

RIDER/DRIVER/HANDLER #1 (MANDATORY)

Print Name: _____

Rider #1 USEF # _____ Breed Association # _____

Rider #1 Address: _____
Street / P.O. Box City State Zipcode

Emergency Phone No: _____ Email address: _____

Rider #1 Signature (Adult/Guardian, for the minor): _____

Print Name – of Adult/Guardian: _____

TRAINER (MANDATORY - even if same as owner)

Signature: _____

Print Name: _____

RIDER/DRIVER/HANDLER #2 (MANDATORY)

Print Name: _____

Rider #2 USEF # _____ Breed Association # _____

Rider #2 Address: _____
Street / P.O. City State Zipcode

Emergency Phone No: _____ Email address: _____

Rider #2 Signature (Adult/Guardian, for the minor): _____

Print Name – of Adult/Guardian: _____