

**ONLY ONE HORSE PER FORM  
ENTIRES CLOSE JULY 6, 2011**

# Menlo Charity Horse Show August 9-14, 2011

For more information: Debbie Haub – Secretary  
Telephone (415) 584-7690 (Phone before 7:00 a.m. or after 8:00 p.m.)

**ENTRIES WILL ONLY BE ACCEPTED WITH A POSTMARK BY THE U.S. POST OFFICE, FEDEX OR UPS  
NO HAND DELIVERED, FAXED OR EMAILED ENTRIES WILL BE ACCEPTED**

ENTRY NO. \_\_\_\_\_

TRAINER						
NAME	ADDRESS	CITY/ST.	ZIP	Date of Birth	/	/
BARN NAME						
HOME # ( )	WORK # ( )	CELL # ( )	EMAIL	SS#/TAX ID#		
USEF#	USHJA #	PCHA #	NCHJA #	CPHA #	ASPCA #	
USEF CARD	JOIN	N/M	USHJA CARD	JOIN	N/M	PCHA CARD
				AFF.	JOIN	N/M

OWNER						
NAME	ADDRESS	CITY/ST.	ZIP	Date of Birth	/	/
BARN NAME						
HOME # ( )	WORK # ( )	CELL # ( )	EMAIL	SS#/TAX ID#		
USEF#	USHJA #	PCHA #	NCHJA #	CPHA #	ASPCA #	
USEF CARD	JOIN	N/M	USHJA CARD	JOIN	N/M	PCHA CARD
				AFF.	JOIN	N/M

RIDER ONE						
NAME	ADDRESS	CITY/ST.	ZIP	Date of Birth	/	/
BARN NAME						
HOME # ( )	WORK # ( )	CELL # ( )	EMAIL	SS#/TAX ID#		
USEF#	USHJA #	PCHA #	NCHJA #	CPHA #	ASPCA #	
USEF CARD	JOIN	N/M	USHJA CARD	JOIN	N/M	PCHA CARD
				AFF.	JOIN	N/M

RIDER TWO						
NAME	ADDRESS	CITY/ST.	ZIP	Date of Birth	/	/
BARN NAME						
HOME # ( )	WORK # ( )	CELL # ( )	EMAIL	SS#/TAX ID#		
USEF#	USHJA #	PCHA #	NCHJA #	CPHA #	ASPCA #	
USEF CARD	JOIN	N/M	USHJA CARD	JOIN	N/M	PCHA CARD
				AFF.	JOIN	N/M

RIDER THREE						
NAME	ADDRESS	CITY/ST.	ZIP	Date of Birth	/	/
BARN NAME						
HOME # ( )	WORK # ( )	CELL # ( )	EMAIL	SS#/TAX ID#		
USEF#	USHJA #	PCHA #	NCHJA #	CPHA #	ASPCA #	
USEF CARD	JOIN	N/M	USHJA CARD	JOIN	N/M	PCHA CARD
				AFF.	JOIN	N/M

HORSE	AGE	COLOR	SEX	HEIGHT	USHJA REGISTRATION #	PLEASE CIRCLE BELOW IF APPLICABLE HORSE / PONY
						1ST YR   2ND YR   SM   MED   LG

**BACK OF ENTRY FORM MUST BE SIGNED**

RIDER ONE	RIDER TWO	RIDER THREE	MEASUREMENT #	USEF REGISTRATION #	1ST YR	2ND YR	SM	MED	LG
CLASSES	CLASSES	CLASSES							

CREDIT CARD PAYMENT		RECIPIENT OF PRIZE MONEY AWARDS			
VISA/MC #	NAME OF INDIVIDUAL	OR CORPORATION			
EXP. DATE	SS#	OR TIN ID#			
BACK OF CARD 3-DIGIT # V-CODE	ADDRESS	CITY/ST/ZIP			
CARD HOLDER NAME	MEASUREMENT CARD VERIFIED	MEDAL MEMBERSHIP CARDS	RIDER 1: NCHJA _____	CPHA _____	ASPCA _____
AUTHORIZED SIGNATURE	PONY: _____ HORSE: _____		RIDER 2: NCHJA _____	CPHA _____	ASPCA _____
			RIDER 3: NCHJA _____	CPHA _____	ASPCA _____
			TRAINER: NCHJA _____	CPHA _____	ASPCA _____

PLEASE STABLE MY HORSE WITH:

(Barn Name or Trainer)

HORSE SHOW FEES AND MISCELLANEOUS	
Total Entry Fee	\$ _____
Stall Fee @ \$220.00	\$ _____
Grounds Fee @ \$50.00 per day (per horse or pony not using stall)	\$ _____
Processing Fee @ \$100.00 (Mandatory)	\$ 100.00
Late Processing Fee @ \$50.00 (per horse or pony)	\$ _____
Friday Night Dinner/Dance @ \$225.00 per person	\$ _____
Donation to Vista Center For The Blind and Visually Impaired	\$ _____
Season 8 Seat Table (Polo Field) Hunter Side @ \$750.00	\$ _____
Middle @ \$750.00	\$ _____
Jumper Side @ \$750.00	\$ _____
Sponsorship	\$ _____

ASSOCIATION FEES	
Horse Fee	
USEF Fee @ \$8.00, PCHA Fee @ \$3.00, NCHJA Fee @ \$3.00	\$ _____
Horse Drug Fee	
USEF Drug and Medication Fee @ \$7.00, COFA Fee @ \$5.00	\$ _____
USHJA Zone Support Fee @ \$2.00	\$ _____
Total = \$28.00 per horse or pony (Mandatory)	\$ 28.00

NON-MEMBER FEES	
USEF Non-Member Fee @ \$30.00	\$ _____
USEF Amateur Certification @ \$30.00	\$ _____
USHJA Non-Member Fee @ \$30.00	\$ _____
PCHA Non-Member Fee @ \$10.00	\$ _____

JUMPER NOMINATION FEES	
Nominating Fee (YJC-5 Yr. Olds, 1.15 m, Children's, Adult Amateur) @ \$50.00	\$ _____
Nominating Fee (YJC-6, 7, 8 Yr. Olds, 1.30 m, 1.35 m, 1.40 m, Amateur Owner, Junior, Modified Junior/Amateur) @ \$150.00	\$ _____
Nominating Fee (Grand Prix) Non-Refundable @ \$200.00	\$ _____
IHP Fee \$35.00 per horse competing in Grand Prix	\$ _____
Amount Enclosed or Credit Card Charged	\$ _____

PLEASE UNDERSTAND THAT ENTRIES ARE NOT ACCEPTED UNLESS ACCOMPANIED BY PAYMENT IN FULL ENTRY, STALL, HORSE AND MISCELLANEOUS FEES MUST ACCOMPANY ENTRY BLANK

Please make check payable to: Menlo Charity Horse Show, Inc.

Mail Entries to:  
**Menlo Charity Horse Show**  
118 Lake Merced Hill, San Francisco, CA 94132

NOTE: Credit Cards will be processed and open checks will be filled in for the Full Amount.

Office Use Only	
Credit Card Amount _____	Date Processed _____
Credit Card Amount _____	Date Processed _____
Credit Card Amount _____	Date Processed _____
CK# _____ Amount _____	Date Rec'v _____
CK# _____ Amount _____	Date Rec'v _____
Cash _____ Amount _____	Date Rec'v _____
Cash _____ Amount _____	Date Rec'v _____
Refund Amount _____	Date Processed _____
Refund Amount _____	Date Processed _____
Refund Amount _____	Date Processed _____
Credit Card Charge Back <input type="checkbox"/>	Check <input type="checkbox"/>

I hereby certify horse and rider are eligible as entered. "The undersigned (herein described as Entrant) understands and acknowledges that horse sports and the competition involve inherent dangers that include, but are not limited to, hazards of personal injury, property damage or wrongful death. ENTRANT HEREBY EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF INJURY OR LOSS as a result of participation in the Horse Show. In consideration of the admission and entry of Entrant, and any other participants in said Show, ENTRANT HEREBY WAIVES, RELEASES, INDEMNIFIES, AND HOLDS HARMLESS the following from and against any and all claims, demands, expenses, losses and/or causes of action which Entrant, rider, or any other participant to said Horse Show might otherwise now or hereafter have against the Menlo Circus Club, the Vista Center for the Blind and Visually Impaired, the United States Equestrian Federation, Inc., the United States Hunter Jumper Association, the Pacific Coast Horse Shows Association (PCHA), and the Norcal Hunter Jumper Association its officers, members, agents, employees, licensees and invitees and any person, firm, corporation, and the entity or any one or more of them connected in any way with said Horse Show, or in control of the premises or equipment related thereto and each of them, for damage to property and/or injury or death to persons, including the Entrant, arising out of, or in any way connected with participation in said Horse Show, INCLUDING, BUT NOT LIMITED TO PERSONAL INJURY OR INJURIES, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE. It is understood and agreed that this waiver, release and assumption of risks is to be binding upon Entrant's heirs and assigns. The Entrant acknowledges that he or she has read the foregoing and is fully aware of the legal consequences of signing below."

The OWNER agrees to INDEMNIFY AND HOLD the United States Equestrian Federation, Inc., the United States Hunter Jumper Association, the Vista Center for the Blind and Visually Impaired, the Menlo Circus Club, the Pacific Coast Horse Shows Association (PCHA), and the Norcal Hunter Jumper Association their officials, directors, employees and agents HARMLESS FROM AND AGAINST ALL CLAIMS including any claims for injury or loss suffered by me or anyone else in connection with the competition, WHETHER OR NOT SUCH CLAIM, INJURY OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM MY NEGLIGENCE OR OMISSIONS OR THE NEGLIGENT ACTS OR OMISSIONS OF SAID OFFICIALS, DIRECTORS, EMPLOYEES OR AGENTS OF THE UNITED STATES EQUESTRIAN FEDERATION, INC. OR COMPETITION. For example, if my horse injures someone or someone's property, I agree to indemnify and hold the aforementioned parties harmless from all claims for injury or loss. If the trainer is signing below on behalf of the owner, the trainer is hereby representing that he or she is duly authorized to sign on behalf of the owner.

**All Trainers and exhibitors are hereby informed and warned that there is a current outbreak of EHV-1 in the State of California. Attending this event may subject your horse to other horses who carry or who have been exposed to infection associated with EHV-1 or other viruses/illnesses. Participation in this event will presume that you are aware of and have assumed the risk of possible infection to your horse. It is recommended that all trainers and exhibitors consult their own veterinarians before attending.**

### Federation Release, 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, Menlo Charity Horse Show to the following:

I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

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 hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results resulted, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition 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 while at the Competition. I have read the Federation Rules about protective equipment, including GR801 and if applicable, EV114, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation 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 all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

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 Federation on the official USEF accident/injury report form.

**BY SIGNING BELOW, I AGREE** to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

Rider/Driver/Handler/Vaulter/Longeur (mandatory)	Owner/Agent (mandatory)	Trainer (mandatory)	Coach (if applicable)
Rider One Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Rider Two Signature: _____	Rider One - Parent/Guardian Signature (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____		
Print Name: _____	Print Parent/Guardian Name: _____	Emergency Contact Phone No. _____	
Rider Three Signature: _____	Is Rider/Driver/Vaulter a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Print Name: _____	Rider Two - Parent/Guardian Signature (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____		
	Print Parent/Guardian Name: _____	Emergency Contact Phone No. _____	
	Is Rider/Driver/Vaulter a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Rider Three - Parent/Guardian Signature (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____		
	Print Parent/Guardian Name: _____	Emergency Contact Phone No. _____	
	Is Rider/Driver/Vaulter a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		