

ONE OWNER PER FORM USEF # _____ AMHA # _____
 UPHA # _____ USDF # _____
 OWNER _____
 ADDRESS _____
 PHONE _____
 EMAIL _____
 PLEASE STABLE WITH _____

**MAINE
 MORGAN HORSE SHOW**
 JULY 1-3, 2010
 ENTRIES CLOSE JUNE 6, 2010
 REFER TO PRIZE LIST
 REGARDING POST ENTRIES

Please make checks payable to
 Maine Morgan Horse Show
 and return with this form to:
Mary J. Wahl
110 Nimble Hill Road
Newington, NH 03801
 603-436-7638
 Email : wahl2wahl@earthlink.net

EB#

Entry #	Horse Name #1	USDF Reg. #	Sex	DOB	Sire	Dam
	Classes					Shown By
	Classes					Shown By
Entry #	Horse Name #2	USDF Reg. #	Sex	DOB	Sire	Dam
	Classes					Shown By
	Classes					Shown By
Entry #	Horse Name #3	USDF Reg. #	Sex	DOB	Sire	Dam
	Classes					Shown By
	Classes					Shown By

TOTALS

HORSE #1	_____
HORSE #2	_____
HORSE #3	_____
USEF DRUG FEE \$15 PER HORSE (INCLUDES \$7 D&M)	_____
USEF	_____
NON-MEMBER FEE @ \$30	_____
HORSE STALLS THURS-SUN @ \$100	_____
HORSE STALLS EARLY ARRIVAL @ \$30/DAY	_____
SHOWING OUT OF TRAILER @ \$30	_____
TACK STALLS @ \$100	_____
CAMPERS/TENTS @ \$85	_____
CAMPERS/TENTS EARLY ARRIVAL @ \$15/DAY	_____
SHOW SPONSOR (Regular/Championship/Corporate)	_____
BREEDER'S CUP SPONSOR	_____
CLAM BAKE @ \$40/MEAL	_____
LOBSTER	<input type="checkbox"/>
CHICKEN	<input type="checkbox"/>
CHILD MEAL AT CLAM BAKE @ \$9/MEAL	_____
OFFICE FEE @ \$20	_____
TOTAL	_____

OFFICE USE ONLY	USEF# _____ AMHA# _____	Rider #1 _____
	REG _____ COG _____	Address _____
	RABIES _____ UPHA# _____	City, State, ZIP _____
	SIG _____ PD _____	USEF# _____ AMHA# _____ UPHA# _____ USDF# _____
	CK# _____ CC _____	Rider #2 _____
	USDF# _____	Address _____
		City, State, ZIP _____
		USEF# _____ AMHA# _____ UPHA# _____ USDF# _____

Make checks payable to Maine Morgan Horse Show
Non-US checks must be marked "Payable in US Funds"
 If you wish to charge your entries, please fill out the following:

VISA MC

EXPIRATION DATE _____ SEC CODE _____

SIGNATURE _____

Please use this form to list all your customers who are to be stabled with you, including those sent in separately. Requests from entries to be stables with you will not be considered unless their name appears on the list below.

Owners Name	# Stalls
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

United States Equestrian Federation, Inc. Entry Agreement

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List UPHA Chapter 14 and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, Prize List, and local rules of the competition. I agree to waive the right to the use of my photos from the Competition, and agree that any actions against the Federation must be brought in New York State.

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 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 UPHA Chapter 14 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 that I 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 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.

X _____ X _____
 (Owner/Agent) Mandatory—See front for complete address/USEF Number info USEF # Trainer (Mandatory) (Rider/Driver/Handler #1 (Mandatory))

Print Name _____ Print Name _____

Coach Signature _____ Address _____ X _____ (Rider/Driver/Handler #2 (Mandatory))

Print Coach Name _____

Coach USEF# _____ City, State, Zip _____ Print Name _____

Coach Address _____ Phone _____ X _____ (Rider/Driver/Handler #3 (Mandatory))

E-Mail: _____ Print Name _____

Parent/Guardian Signature: (If Rider/Driver/Handler is a minor) _____ Emergency Number _____

Print Parent/Guardian Name: _____ Is Rider/Driver a US Citizen: Yes No