

**CHECKS TO COVER ALL FEES
ENTRIES CLOSE APRIL 16, 2010**

ENTRY FEES AND STALL FEES MUST ACCOMPANY ENTRY BLANK

TWENTY SEVENTH ANNUAL ASHEVILLE LIONS BENEFIT HORSE SHOW

Western North Carolina Horse Show Arena
Fletcher, North Carolina

SHOW DATES: MAY 19-22, 2010

Mr. Ray Cloninger, Show Manager
Mrs. Joyce Wilson, Show Secretary

C	Do Not Use This Space	Name of Horse Class Number Under Name	Total Entrance	Card Measure	Color	Sex	Height	Year Foaled	Reg. #	USEF HORSE ID#	EXHIBITOR (If more than one rider, specify rider and class) (If equitation - give complete address of rider)	Exhibitor USEF #	Jr. Exhibitor DOB	OWNER		
														Name _____	Farm ID # _____	
															Name _____	USEF # _____
															Street _____	ASHA # _____
															City _____	State _____ Zip _____
															Name _____	Farm ID # _____
															Street _____	ASHA # _____
															City _____	State _____ Zip _____
															Name _____	Farm ID # _____
															Street _____	ASHA # _____
															City _____	State _____ Zip _____

STALL WITH....

	TOTAL ENTRY FEES	DO NOT USE THIS SPACE
___ Permanent Stalls	@ \$ 95.00	
___ Stalls for early arrival	@ \$ 15.00	
___ Ground Fee (non stabled horses)	@ \$ 20.00	
___ USEF Fee (Drug & Medication \$7.00 + US-E -\$8.00)	@ \$ 15.00	
___ USEF Non- Member Fee Senior or Junior	@ \$ 30.00	
___ Office Fee - Per Horse	@ \$ 20.00	
___ Post entries - Per Horse	@ \$ 20.00	
___ Skyboxes (8) seats	@ \$ 325.00	
___ Bag Shavings	@ \$ 6.50	
___ Camper per day/night	@ \$ 30.00	
___ Preordered Golf Carts	@ \$ 300.00	
OPEN CHECK POLICY	TOTAL AMOUNT DUE	

MAIL PREMIUM CHECKS TO :

(If you want Premium Checks to go to different owners, you must fill out a separate entry blank for each owner.)

Print Name _____

Address _____ City _____ State _____ Zip _____

Tel. No. _____ SS # _____

Email _____ Emergency Contact: Name _____

Will only be used for horse show.

Telephone _____

For Office Use Only

Date Received _____

Check # _____

Receipt # _____

Amount \$ _____

**CHECKS TO COVER ALL FEES
MUST ACCOMPANY ENTRIES**

NO INITIAL BEDDING SUPPLIED

**STALLS AVAILABLE FOR
OCCUPANCY
MONDAY 8 AM**

Make checks payable and mail to:

ASHEVILLE LIONS BENEFIT HORSE SHOW
c/o Joyce Wilson
7934 Old Bunch Rd.
Zebulon, N.C. 27597

Please READ information on the REVERSE SIDE, fill in the blanks and sign.

Will arrive _____ . Will stay at _____ hotel.

Office Notes

ASHEVILLE LIONS BENEFIT HORSE SHOW • MAY 19-22, 2010

I AGREE NEITHER THE ASHEVILLE LIONS BENEFIT HORSE SHOW, THE WESTERN NC AGRICULTURAL CENTER, THE STATE OF NORTH CAROLINA, NOR THE MANAGEMENT, NOR THE OFFICIALS OF THE SHOW WILL BE RESPONSIBLE FOR ANY ACCIDENT, DAMAGE, LOSS OR INJURY TO MOUNT, OWNER, RIDER OR OTHER PERSONS OR PROPERTY. IT WILL BE THE CONDITION OF ENTRY THAT EACH EXHIBITOR SHALL HOLD THE HORSE SHOW AND ITS MANAGEMENT BLAMELESS FOR ANY LOSS OR ACCIDENT TO ANY ANIMAL, PERSON OR PROPERTY THAT MAY OCCUR FROM SICKNESS, FIRE AND OTHERWISE AT THIS SHOW. UNDER SOUTH CAROLINA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING EXCLUSIVELY FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

PLEASE enclose copies of Negative Coggins Test for all horses entered. NEW STATE LAW requires EVERY HORSE ON THE GROUNDS (SHOWING OR NOT SHOWING) TO SHOW A CURRENT NEG TEST IN ORDER TO REMAIN ON THE GROUNDS. EACH HORSE MUST BE OFFICIALLY ENTERED ON AN ENTRY FORM. STALL FEES DUE WITH ENTRY FORM TO GUARANTEE RESERVATION.

“ I further agree that if any damage shall be occasioned or loss occur, by fire or otherwise, to the horses exhibited, or to any vehicle or other article that I may send with such horses that I will make no negligence or the persons in charge of such horses and to repay this show, on demand, all damages it may sustain by reason of any claim or demand as aforesaid.”

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 of the Asheville Lions Club 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, lounge, 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 or accidents, 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 of 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 me 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 _____
 Rider, Driver or Handler Signature (ADULT ONLY)
 If minor, parent/guardian
 Name _____
 Street _____
 City _____
 State _____ Zip _____
 Telephone () _____
 Exhibitor’s USEF# _____
 Exhibitor’s UPHA # _____
 Exhibitor’s SS # _____
 US Citizen: Yes or No - circle one
 If more than one, attach signed copy of this page

X _____
 Trainer’s Signature (ADULT ONLY)
 If minor, parent/guardian
 Name _____
 Street _____
 City _____
 State _____ Zip _____
 Telephone () _____
 Trainer’s USEF # _____
 Trainer’s UPHA # _____
 Trainer’s SS # _____
 Trainer’s ASHA # _____
 If more than one, attach signed copy of this page

X _____
 Owner or Agent’s Signature (ADULT ONLY)
 If minor, parent/guardian
 Name _____
 Street _____
 City _____
 State _____ Zip _____
 Telephone () _____
 Owner’s USEF # _____
 Owner’s UPHA # _____
 Owner’s SS # _____
 Owner’s ASHA # _____
 If more than one, attach signed copy of this page

X _____
 Coach Signature (ADULT ONLY)
 (Parent/guardian, if under 18, or if not available, trainer must sign)
 Name _____
 USEF # _____
 If more than one, attach signed copy of this page