

**ONLY ONE (1) OWNER PER FORM**

OWNER	
Print Name of Legal Owner (Signature on Back)	
Street or P.O. Box of Owner or Agent	
City	State Zip
Phone No. of Owner	Owner Email Address
USEF #	ASHA #
AMHA # / AHA #	UPHA #

# Charity Fair Horse Show

## USEF ENTRY FORM Saddlebred, Morgan, Opportunity

**JUNE 12 – 15, 2024**

**Del Mar, California - Fairgrounds**

**COMPLETE BOTH SIDES OF THIS FORM  
OR ONLINE @ [www.HorseShowsOnline.com](http://www.HorseShowsOnline.com)**

**ENTRIES CLOSE MAY 27, 2024**

TRAINER	
Print Trainer's Name (Signature on Back)	
Street or P.O. Box of Trainer	
City	State Zip
Phone No. of Trainer	Trainer Email Address
USEF #	ASHA #
AMHA # / AHA #	UPHA #

LEAVE BLANK	NAME OF HORSE (Class Number Under Name. One Class Per Square)	TOTAL FEES	BREED REG # & USEF REC #	RIDER, DRIVER OR HANDLER (Provide address on reverse)			
			BREED REG#	NAME:			
			USEF REC#	USEF:	ASHA:	AMHA/ AHA:	UPHA:
			BREED REG#	NAME:			
			USEF REC#	USEF:	ASHA:	AMHA/ AHA:	UPHA:
			BREED REG#	NAME:			
			USEF REC#	USEF:	ASHA:	AMHA/ AHA:	UPHA:
			BREED REG#	NAME:			
			USEF REC#	USEF:	ASHA:	AMHA/ AHA:	UPHA:

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

CREDIT CARD PAYMENT INFORMATION	
Name as it appears on card	
Card Number / Type	
Exp. Date	Billing Zip Code
3 digit security code	
Cardholder's Signature	
Note – 4% transaction fee to be applied	

**MAKE ALL CHECKS PAYABLE TO:  
CHARITY FAIR HORSE SHOW**

**NO ENTRIES ACCEPTED UNLESS  
ACCOMPANIED BY CHECK IN FULL  
OR CREDIT CARD AUTHORIZATION**

**FOR MORE INFORMATION CALL:  
RON HOOD (831) 524-5248**

**MAIL ENTRIES TO:**

**CHARITY FAIR HORSE SHOW  
RON HOOD  
280 MANSFIELD ROAD  
HOLLISTER, CA 95023**

ENTRY FEES ..... \$ \_\_\_\_\_  
 POST ENTRY FEE (PER HORSE – SEE RULE 12 - \$30 if before 6/8...(\_\_\_\_) x \$ 40 \$ \_\_\_\_\_  
 OFFICE FEES (PER HORSE)..... x \$ 25 \$ \_\_\_\_\_  
 CREDENTIALS at \$20.00 per person ..... (\_\_\_\_) x \$ 20 \$ \_\_\_\_\_  
 STALLS/TACK ROOMS, NO FIRST BEDDING ..... (\_\_\_\_) x \$ 205 \$ \_\_\_\_\_  
 EARLY ARRIVALS (PER DAY, PER STALL – SEE RULE 23) ..... (\_\_\_\_) x \$ 40 \$ \_\_\_\_\_  
 GROUNDS FEE per horse, per day for horses not requiring stalls..... (\_\_\_\_) x \$ 45 \$ \_\_\_\_\_  
 CA DRUG FEE (PER HORSE)..... (\_\_\_\_) x \$ 14\$ \_\_\_\_\_  
 USEF FEE \$23/horse (\$15 drugs/meds; \$8 USEF) ..... (\_\_\_\_) x \$ 23 \$ \_\_\_\_\_  
 AMHA Non-Member Fee (per owner, trainer and exhibitor) ..... (\_\_\_\_) x \$ 45 \$ \_\_\_\_\_  
 BOX SEATS – SEE PAGE 7 ..... (\_\_\_\_) x \$ 450 \$ \_\_\_\_\_  
 CLASS SPONSOR – SEE PAGE 7 ..... \$ \_\_\_\_\_

TOTAL ENCLOSED ..... \$ \_\_\_\_\_

SAFE SPORT TRAINING COMPLETED - YES \_\_\_\_\_ NO \_\_\_\_\_  
 STABLE WITH:

## US Equestrian Federation Entry Agreement

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of Charity Fair Horse Show (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. 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. If not currently a USEF Active Competing member or Subscriber and competing only in classes that are exempt from membership requirements, I acknowledge and agree that I will be enrolled at no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew unless and until USEF determines in its sole discretion to terminate my Fan account. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

BY SIGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at [www.usef.org](http://www.usef.org), as amended from time to time, as well as all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

### OWNER/AGENT (MANDATORY)

Adult Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### RIDER/DRIVER/HANDLER #1 (MANDATORY)

Print Name: \_\_\_\_\_ Jr. DOB: \_\_\_\_\_

Rider #1 Street Address: \_\_\_\_\_

Rider #1 City/State/Zipcode: \_\_\_\_\_

Emergency Contact Phone No: \_\_\_\_\_ Email address: \_\_\_\_\_

Rider #1 Signature: \_\_\_\_\_

**(If exhibitor is a minor, Parent/Guardian to sign)**

Print Name – of Adult/Guardian: \_\_\_\_\_

### TRAINER (MANDATORY)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### RIDER/DRIVER/HANDLER #2 (MANDATORY)

Print Name: \_\_\_\_\_ Jr. DOB \_\_\_\_\_

Rider #2 Street Address: \_\_\_\_\_

Rider #2 City/State/Zipcode: \_\_\_\_\_

Emergency Contact Phone No: \_\_\_\_\_ Email address: \_\_\_\_\_

Rider #2 Signature: \_\_\_\_\_

**(If exhibitor is a minor, Parent/Guardian to sign)**

Print Name – of Adult/Guardian: \_\_\_\_\_