



ARABIAN TWO DAY VALUE SHOW ENTRY FORM

REQUIRED: Include a copy of horse registration papers, coggins & trainer/owner/exhibitor AHA Competition Membership cards, if applicable

SEND TO:
 Autumn Classic
 PO Box 70273
 Albany, GA 31708
 Show Secretary: Melinda Rich
autumnclassic1985@gmail.com

| | | | | | | | | | | | |
|----------------|-----------|--------|------|-------------------------------------|--|-----|--|---|--|-----|--|
| Horse's Name | | Reg No | | DOB MM/DD/YY | | Sex | | Color | | | |
| Breed | | | Sire | | | Dam | | | | | |
| Rider 1 | Class # | | | | | | | | | | |
| | Class Fee | | | | | | | | | | |
| Name | | | | DOB MM/DD/YY | | | | Amateur Certificate Yes _____ No _____ | | | |
| AHA # | | | | Amateur Relationship to Horse Owner | | | | | | | |
| Address | | | | City | | | | State | | Zip | |
| Rider 2 | Class # | | | | | | | | | | |
| | Class Fee | | | | | | | | | | |
| Name | | | | DOB MM/DD/YY | | | | Amateur Certificate Yes _____ No _____ | | | |
| AHA # | | | | Amateur Relationship to Horse Owner | | | | | | | |
| Address | | | | City | | | | State | | Zip | |

OWNER INFORMATION Owner name as it appears on registration papers/purchase contract

Name _____
 AHA # _____ Farm/Ranch _____
 Address _____ Phone _____
 City _____ St _____ Zip _____
 Email _____

TRAINER INFORMATION must be filled out, if no trainer, owner may write in "same"

Name _____
 AHA # _____ Farm/Ranch _____
 Address _____ Phone _____
 City _____ St _____ Zip _____
 Email _____

Stable With _____

| | | |
|--|---------|----------|
| # Class Fee @ \$10.00 | \$ | _____ |
| # Class Fee @ \$15.00 | \$ | _____ |
| # Class Fee @ \$20.00 | \$ | _____ |
| # Class Fee @ \$25.00 | \$ | _____ |
| Office Fee @ \$20.00/Horse | \$ | _____ |
| AHA Single Event Fee | \$ | _____ |
| \$35.00/person | | _____ |
| AHA 9-90 & Show | \$ | _____ |
| Recognition Fee | | _____ |
| \$10.00/horse | | _____ |
| # Jumping Warm Up | \$ | _____ |
| \$5.00/Rider | | _____ |
| # Tack Stall @ \$65.00 | \$ | _____ |
| # Horse Stall \$65.00 | \$ | _____ |
| OR | | |
| Grounds Fee | \$25.00 | \$ _____ |
| Post Entry @ \$15.00 | \$ | _____ |
| per horse after Nov 1 | | |
| SUBTOTAL | \$ | _____ |
| Credit/Debit Card Convenience Fee: \$ _____ | | |
| Total Enclosed Fees: \$ _____ | | |
| Make Checks Payable To: Autumn Classic | | |

Credit/Debit Card Information:

Name on Card: _____
 Card Number: _____
 Exp Date: _____ Zip Code: _____ CRV #: _____
 A 3.75% Convenience Fee will be added to all Credit/Debit transactions

PLEASE READ AND COMPLETE RELEASE

Release of Liability: ASSUMPTION OF RISK, RELEASE AND HOLD HARMLESS AGREEMENT: I agree as follows by signing below: I choose for myself (or as parent or guardian to permit a junior exhibitor) to participate voluntarily in this competition. I AM FULLY AWARE AND ACKNOWLEDGE THAT PARTICIPATION IN THIS COMPETITION INVOLVES SERIOUS RISKS OF HARM, INCLUDING PERSONAL INJURIES, DEATH AND DAMAGES TO PROPERTY. I ASSUME RISKS OF HARM AND DAMAGES TO ME, MY HORSE AND PROPERTY. I hereby RELEASE, INDEMNIFY AND HOLD HARMLESS (Including from damages, costs and attorney fees) Arabian Horse Association, the Competition, the facilities, and all of their respective Agents, Servants, Employees and Volunteers (Collectively the "Released Parties") from any claims, relating to the competition and my participation in the competition, belonging to me, or legally caused by me or my horse, for any kind of damages, losses, or injuries to myself, other persons, horses or property to the fullest extent permitted by law. I further agree to adhere to the rules set forth in the Arabian Horse Association One day Show and the Autumn Classic Charity Show rules & Guidelines and understand all decisions made by the judge are deemed final and can not be protested.

| | |
|--|-------------|
| Owner **Mandatory-No Junior Signatures | Signature X |
| Trainer or Custodian of horse @ show **Mandatory-No Junior Signatures | Signature X |
| **Adult Owner must sign if no trainer | Signature X |
| Rider 1 **Mandatory-No Junior Signatures | Signature X |
| Rider 2 **Mandatory-No Junior Signatures | Signature X |

***Entries must be postmarked no later that November 1, 2019**
***Copies of Dressage entries must also be sent to Teresa Underwood for ride times to be assigned**
 Teresa Underwood-4751 Shirley Rd, Gainesville, GA 30506 or lazywold@bellsouth.net

OFFICE USE:
 Check # _____ Amount of Check _____ Name on Check _____