ONE OWNER PER FORM USEF # AMHA # UPHA # USDF # OWNER ADDRESS CITY/STATE/ZIP PHONE EMAIL						HORSE SHOW August 12-15, 2020 ENTRIES RECEIVED AFTER MONDAY, JULY 27, 2020			Please make checks payable to Massachusetts Morgan Horse Show and return with this form to: Kelly McFaul, Secretary 206 S Lark Ln. Wichita, KS 67209 316-650-2287 FAX: 316-462-0883 kellymcfa@aol.com		
STABLE WIT	"Н										TOTALS
Entry #	Horse Name			Reg #	Sex		K YOB	Sire	Dam		HORSE #1
				USDF #							HORSE #2
	Classes:	Classes:				Shown by					HORSE #3
										USEF DRUG FEE (includes \$8 D&M)	
	Classes:						у		@ \$23		
											REGULAR STALLS C, D, F BARNS
Entry #	Horse Name Reg #				Sex	YOB	Sire	Dam		@ \$155	
	USDF #				-					E BARN STALLS @ \$155	

Shown by

Shown by

Sex

Shown by

Shown by

Sire

YOB

Reg #

USDF #

Classes:

Classes:

Classes:

Classes:

Horse Name

Entry #

					1						
· · · · ·										AMHA NON-MEMBER FEE@ \$45	
lake checks payable to Massachusetts Morgan Horse Show						, Rider 1		OFFICE FEE PER OWNER			
Non-US checks must be marked "payable in US funds" If paying by credit card, fill out below.						Address		@ \$30			
					/.	City/State/Zip		SPONSORSHIP			
		· ·							USDF#	LATE FEE (after 7-27-20) @ \$100 per horse	
Exp Date_		Sec Code		_Zip Code	e	Rider 2					
Signature			Address	TOTAL							
						City/State/Zip					
						USEF#	AMHA #	UPHA #	USDF#		

Dam

MALLARY STALLS

_____ @ \$170_____

CAMPER SPACE 50 AMP

____@ \$45 _____

BOX SEATS _____@ \$135______ USEF SHOW PASS FEE

TRAILER FEE (for horses not stalled)

_____ @ \$25 per day ______ CAMPER SPACE 30 AMP _____@ \$250______

_____@ \$300______

Please use this form to list all your customers who are to be stabled with	UN	ITED STATES EQUESTRIAN	FEDERATION, INC. ENTRY	AGREEMENT				
you, including those sent in separately. Requests from entries to be stabled with you will not be considered unless their name appears on the list below. OWNERS NAME # OF STALLS	By entering a Federation-licens Handler, Vaulter or Longeur an Bylaws and Rules of The United to be bound by the Bylaws and question arising under the Rule for any action taken under the eligible as entered. I also agree or assign photographs, videos, a course of the competition for th advertise a product and they m any rights in connection with s construction and application of must be filed in New York State BY SIGNING BELOW, I AGREE to sions of this Prize List. If I am sig	d on behalf of myself and my prin States Equestrian Federation, Inc. I Rules of the Federation and of the s, and agree to release and hold ha Rules. I represent that I am eligibl that as a condition of and in consid audios, cable - casts, broadcasts, in the promotion, coverage or benefit of ay not be used in such a way as to such use, including any claim to co Federation rules are governed by t See GR908.4. be bound by all applicable Federat	icipals, representatives, employee (the "Federation") and the local rul competition. I will accept as final t armless the competition, the Fede le to enter and/or participate under deration of acceptance of entry, th ternet, film, new media or other lil of the competition, sport, or the Fe- jeopardize amateur status. I hereb ompensation, invasion of privacy, a he laws of the State of New York, an ion Rules and all terms and provision nt electronically, I acknowledge tha	Trainer, Manager, Agent, Coach, Driver, Rider, s and agents, I agree that I am subject to the les of Blue Ridge Classic (Competition). I agree the decision of the Hearing Committee on any ration, their officials, directors and employees er the Rules, and every horse I am entering is e Federation and/or the Competition may use kenesses of me and my horse taken during the deration. Those likenesses shall not be used to by expressly and irrevocably waive and release right of publicity, or to misappropriation. The nd any action instituted against the Federation cons of this entry blank and all terms and provi- at my electronic signature shall have the same				
	SIGNATURES REQUIRED BELOW - No one under 18 may sign							
	OWNER (mandatory)	TRAINER (mandatory)	RIDER/DRIVER/HAN (mandatory)	DLER COACH (if applicable)				
	Signature	Signature	Signature	Signature				
	Print Name	Print Name	Print Name	Print Name				
TOTAL	Trainer Address							
WARNING: Under Massachusetts Law, an equine professional is not liable for an	Trainer City/State/Zip							
injury to, or death of, a participant in equine activities resulting from the inherent risks of equine activities. Pursuant to Chapter	USEF#	AMHA #	UPHA #	_ USDF#				
128, Section 2D of the General Law.	Cell Phone/Emergency #		Email					