

ONLY ONE (1) OWNER PER FORM

COMPLETE BOTH SIDES OF THIS FORM

DO NOT MAIL AFTER JUNE 23, 2018

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

99th Annual
2018
Santa Barbara
National Horse Show

July 5-7, 2018

**OGB, Rocky Mountain, Icelandic
 Tennessee Walking Horses,
 Mountain and Moorland Ponies**

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

LEAVE BLANK	NAME OF HORSE (Class Number Under Name. One Class Per Square)	TOTAL FEES	BREED REG #	RIDER, DRIVER OR HANDLER (Provide address on reverse)
			BREED REG#	NAME:
			BREED REG#	NAME:
			BREED REG#	NAME:
			BREED REG#	NAME:

PLEASE SEND COPIES OF HORSE REGISTRATION PAPERS SHOWING PROOF OF OWNERSHIP WITH THIS ENTRY FORM.

OFFICE USE ONLY
AMT PAID _____ FOR #S _____
CHECK # _____
_____ REGISTRATION PAPERS
_____ OPEN CHECK

MAKE ALL CHECKS PAYABLE TO:

**19TH DISTRICT AGRICULTURAL
 ASSOCIATION**

**FOR MORE INFORMATION CALL:
 RON HOOD (831) 637-8510**

**MAIL ENTRIES TO:
 SANTA BARBARA NATIONAL
 Attn: Ron Hood
 280 Mansfield Road
 Hollister, CA 95023**

STABLE WITH _____

ENTRY FEES \$ _____
 OFFICE FEE (Per Horse) (____) x \$ 30 \$ _____
 STALLS (Horse / Tack) (____) x \$100 \$ _____
 Mountain & Moorland Ponies (Pony / Tack) (____) x \$ 85 \$ _____
 STALLS (Daily Rate) (____) x \$ 30 \$ _____
 EARLY ARRIVALS (Per Day, Per Stall) See Rule 26 (____) x \$ 30 \$ _____
 CA DRUG FEE (Per Horse)..... (____) x \$ 5 \$ _____
 BOX SEATS (See Page 2) \$ _____
 SPONSORSHIP \$ _____
 TOTAL ENCLOSED \$ _____

Santa Barbara National Horse Show Entry Agreement

Every entry made on this entry blank shall constitute an agreement and affirmation that all participants (which shall include, without limitation, the owner, lessee, trainer, manager, agent, coach, driver, rider, handler and the horse) for themselves, their principles, representatives, employees and agents shall be subject to the rules of the Santa Barbara National Horse Show and the Earl Warren Showgrounds, and will accept as final the decision of the hearing committee on any question arising under said rules, and agree to hold the above, its officers, directors, and employees harmless for any action taken.

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, Santa Barbara National Horse Show, to the following:

- I AGREE that I choose to participate voluntarily in the Competition 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 release the Competition, Santa Barbara National Horse Show at the Earl Warren Showgrounds, from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the Competition.
- I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition.
- I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Competition, Santa Barbara National Horse Show and the Earl Warren Showgrounds, 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 at the Competition. I understand that I am entitled to wear protective equipment without penalty and I acknowledge that the Competition 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 assume all of the obligations of this Release on the child’s behalf.
- I AGREE that the Santa Barbara National Horse Show and the Earl Warren Showgrounds, as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.
- 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 Competition on the official accident/injury report form.
- I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

BY SIGNING BELOW, I AGREE TO BE BOUND BY ALL APPLICABLE SANTA BARBARA NATIONAL HORSE SHOW, EARL WARREN SHOWGROUNDS RULES AND ALL TERMS AND PROVISIONS OF THIS ENTRY BLANK. 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)

TRAINER (MANDATORY)

Adult Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

RIDER/DRIVER/HANDLER #1 (MANDATORY)

RIDER/DRIVER/HANDLER #2 (MANDATORY)

Print Name: _____ Jr. DOB: _____

Print Name: _____ Jr. DOB: _____

Rider #1 Street Address: _____

Rider #2 Street Address: _____

Rider #1 City/State/Zip code: _____

Rider #2 City/State/Zip code: _____

Emergency Contact Phone No: _____ Email address: _____

Emergency Contact Phone No: _____ Email address: _____

Rider #1 Signature: _____

Rider #2 Signature: _____

(Parent/Guardian signature, if exhibitor is a minor)

(Parent/Guardian signature, if exhibitor is a minor)

Print Name – of Adult/Guardian: _____

Print Name – of Adult/Guardian: _____