KHJA Fall Classic ☐

STALL FEES MUST ACCOMPANY ENTRY FORM OR IT WILL BE RETURNED

MAKE CHECKS PAYABLE TO:
KHJA
ENTRIES CLOSE AUGUST 28, 2020

MAIL ENTRIES TO:
Julie Moses
381 Windom Ln.
Nicholasville, KY 40356

ARRIVAL DATE:

STABLE WITH:

Check Boxes For Divisions			Horse Name														Color			Sex			Height			Yr Foaled			Green Year		Measurement					
																													1	2							
A/O Hunter	Junior Hunter	Pre Green Hunter	Adult Hunter	Child Hunter	Low Hunter	Special Hunter	Baby Green Hunter	Pre/Int Adult Hunter	Pre/Int Child Hunter		Beginner Horse	Beginner Rider	Long Stirrup	Short Stirrup	TB Hunter 3'	TB Hunter 2'6"	Child Pony Hunter	Long Stirrup EQ.	Short Stirrup EQ.	Cross Rails EQ.	Walk Trot EQ.	Open Jumper	Jr/AO Jumper	Child/ Adult Jumper	School Jumper	Low Child/ Adult Jumper	Training Jumper	TB Jumper 3'	Pre/Int Child/ Adult jumper	TB Jumper 2'6"	Hopeful Jumper	Beginner Jumper						
WRITE IN CLASS NUMBERS FOR MISCELLANEOUS CLASSES AND EQUITATION																																				

COMPETITION ENTRY AGREEMENT
By signing this entry blank as the Owner, Lessee, Trainer, Agent, Coach or Rider and on behalf of myself and my representatives, employees or agents, I agree that I will abide by the rules set forth by this competition.

EMERGENCY CONTACT INFORMATION
Name:_____
Phone:_____

Competition Release. Assumption of Risk Waiver and Indemnification

This Document waives important legal rights. Read it carefully before signing.
I agree, for my participation in this Competition to the following:
I Agree that I choose to participate voluntarily in the Competition with my horse, as a rider, lessee. Owner, agent, coach, trainer or as a 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 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 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 at the Competition.
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 "Competition" as used above includes all officials, officers, directors, employees, agents, personnel and volunteers.
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.
1 represent that I have the requisite training, coaching and abilities to safely compete in this competition.

ONLINE ENTRIES ACCEPTED
https://entries.showmanagementsystem.com

Owner Signature:	Rider 1 Signature:	Trainer Signature:
Owner Name: Address: Address: City/State/Zip: Phone_____Fax_____ SS#/TIN# Corporation? ☐ Yes ☐ No **Email Address:**	Rider Name: Address: Address: City/State/Zip: Phone_____Fax_____ **Email Address:**	Trainer Name: Address: Address: City/State/Zip: Phone_____Fax_____ **Email Address:**
ALTERNATE PRIZE MONEY PAYEE: Name: Address: City/State/Zip: Phone SS/FediD#:	Rider 2 Name: Address: Address: City/State/Zip: Phone_____Fax_____ Email Address:	
Parent/Guardian Signature (Required if rider is a minor)		

Total Entry Fees	
Stall @ $150 KHJA Mbr. / $175 Non-KHJA Mbr.	
Tack @ $150 KHJA Mbr. / $175 Non-KHJA Mbr.	
KY Horse Park Ring Maintenance fee	$10.00
Administration Fee	$45.00
Ground fee (All trailer-ins without stall) $40.00	
Non-Showing Horse $75.00	
Total Amount Due	
Rcvd ck# **Amount Enclosed**	
Balance Due	