

**ALL ENTRIES MUST BE COMPLETE AND RECEIVED BY JULY 20, 2020 AND INCLUDE THE
FOLLOWING
ALL SIGNED DOCUMENTS
ALL REQUIRED HEALTH PAPERS
PAYMENT (CHECK OR CREDIT CARD AUTHORIZATION)
PFHA, USEF MEMBERSHIPS AND SAFE SPORT TRAINING MUST BE CURRENT AT TIME
ENTRIES ARE RECEIVED**

**PLEASE READ THE PRIZE LIST IN ITS ENTIRETY
EVERYONE ENTERING THE VENUE MUST BE FAMILIAR WITH THE COVID-19 GUIDELINES
AND REQUIREMENTS THAT MUST BE FOLLOWED**

ENTRIES AND PAYMENT **MUST BE RECEIVED BY JULY 20, 2020**

ALL ENTRIES ARE TO BE MAILED **OR EMAILED TO SHOW SECRETARY:
JULIE ALDRED
2775 BURKE SMOKEY CREEK RD. LENOIR, NC 28645 PHONE: 828-221-4035 • EMAIL
juliealdred@att.net**

**ALL ENTRIES MUST INCLUDE: COMPLETED ENTRY FORM, SIGNATURES REQUIRED, **ALL SIGNED DOCUMENTS AND
RELEASES**, CURRENT COGGINS, 30-DAY OUT OF STATE HEALTH CERTIFICATE AND PAYMENT – EMAILED ENTRIES MUST
INCLUDE CREDIT CARD PAYMENT USING CREDIT CARD FORM, PG., (check can be submitted at check in for payment in
place of credit card, but entry must include completed credit card form) – MAILED ENTRIES MUST INCLUDE CHECK
PAYABLE TO PIEDMONT PFHA OR CREDIT CARD PAYMENT
INCOMPLETE ENTRIES WILL NOT BE ACCEPTED**

USEF MEMBERSHIP, SAFE SPORT TRAINING, PFHA MEMBERSHIP MUST BE CURRENT

Please send entries only once, either by mail **OR email. Completed entries **MUST BE RECEIVED** by July 20th. **Make
checks payable to Piedmont PFHA****

**MOVE IN: FRIDAY, JULY 24TH – 8AM (arrival times will be scheduled) – MOVE OUT: SUNDAY, JULY 26TH EARLY
ARRIVAL: NOON - THURSDAY, APRIL 23RD \$15/STALL (MUST BE ARRANGED WITH SHOW CHAIRPERSON) HORSES NOT
STALLED BUT ON PREMISES WILL BE CHARGED A GROUND FEE OF \$25/DAY**

**FEES:
\$200/HORSE – INCLUDES TWO (2) CLASS ENTRY FEES, ONE (1) STALL, THREE (3) BAGS SHAVINGS, (1) OFFICE FEE (**NO
OUTSIDE SHAVINGS PERMITTED**)**

ADDITIONAL CLASSES: CLASS FEE: \$50/CLASS CHAMPIONSHIP CLASS: \$50/CLASS

EXTRA SHAVINGS: \$8/bag **NO OUTSIDE SHAVINGS PERMITTED TACK STALLS: \$50/STALL (no shavings)**

COMPLETED ENTRY CHECK SHEET:

- ☐ ENTRY FORM (PAGE 14)
- ☐ REQUIRED HEALTH PAPERS (COGGINS – 30 DAY OUT OF STATE HEALTH CERTIFICATE)
- ☐ USEF SIGNED WAIVER & RELEASE FORM (PAGE 15)
- ☐ SIGNED FEDERATION ENTRY AGREEMENT FORM (PAGE 16)
- ☐ PIEDMONT PFHA WAIVER & RELEASE FORM (PAGE 19)
- ☐ CHECK OR CREDIT CARD AUTHORIZATION FORM (PAGE 12)
- ☐ STALL & RV RESERVATION FORM (PAGE 20)

Requirement: Face masks/face coverings must be worn whenever you have the possibility of being within six feet of another person (including members of your own household), except when mounted on a horse or seated in a horse-drawn carriage or cart. *Please do your part and wear your face mask/face covering as required.*

- Because you cannot predict when another person may be within six feet of you, it is best to keep your face mask/face covering with you at all times while on competition grounds, including those times when you are going to an area where you may be alone or at a greater distance than six feet from another person. This will ensure that you are able to apply your face mask/face covering prior to being within six feet of another person.
- Make sure you are wearing your face mask/face covering prior to entering competition areas where you are likely to be near other people, including areas such as the in-gate, arena, schooling area, restroom, food stand, show office, vendors, stabling, etc.
- If you become hot while wearing your face mask/face covering, move to a location where you are alone or at a distance greater than six feet from another person (and preferably 12 feet or more), and lower or drop one side of your face mask/face covering to cool off.
- ***If an official, competition organizer or member of the organizer's team requires you to don a face mask/face covering, you must comply.***

Requirement: All individuals must practice social distancing (or physical distancing) at all times while on the competition grounds by staying at least six feet (about two arms' length) from any person who is not a member of their immediate household. An *immediate* household is comprised of individuals who may or may not be related but are consistently living in the same house or dwelling.

- Members of an immediate household are still required to wear face masks/face coverings when there is a possibility of being within six feet of any other individuals, including members of their own household.
- Competition organizers are encouraged to implement a system that visually (e.g., numbered or colored IDs or some other form of credential) identifies members of the same immediate household.
- ***If a competition organizer requires that everyone on the show grounds respect social distancing for the consistency of enforcement, you must comply with this requirement.***

If face covering and social distancing and/or mandatory requirements are not followed at the competition, it must be reported to the Competition Manager and the Show Steward at the competition. The Show Steward will inform individuals when they are in violation of the mandatory requirements and it will be documented. **If a second warning is issued, Competition Management will facilitate the removal of an individual with no refund!** The Show Steward must report instances of non-compliance in the Show Steward Report



Paso Fino Horse Show Entry Form

Name of Show _____

Location _____

Show Dates _____

Entries must be accompanied by PFHA cards for each owner, all riders, and trainer; USEF cards for one owner, all riders and trainer; health papers required by law (coggins, vaccine, health); if applicable, copies of Lease Agreement and Affidavit of Sales Contract. Pre-entry prices will not be honored if all credentials are not included by pre-entry deadline.

REQUIRED SIGNATURES ON REVERSE!!!

Hrs #	EB #
W-9	C H V

Horse's Complete Registered Name _____

Sire _____

Dam _____

PFHA Reg. # _____ USEF Reg # _____ (if appl.) MicroChip # _____ (if appl.)

Horse Sex _____ Foaling Date _____ Horse Color _____

Cls #		Rider/Handler Full Name	Jr. DOB	PFHA #	USEF #	ENTRY FEE
	Bella Forma					

PERSON RESPONSIBLE FOR PAYING BILL _____

SEND PAYBACKS TO _____

(If not designated, payback will be sent to the first owner listed below)

(Only One Owner's USEF Membership is Needed Below)

OWNER _____

PFHA Mem # _____ USEF Mem # _____

OWNER _____

PFHA Mem # _____ USEF Mem # _____

OWNER _____

PFHA Mem # _____ USEF Mem # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CELL # _____

E-MAIL _____

RIDER ONE ADDRESS – Same as owner (please check) ☐ If not, list below:

Address _____

City/State/Zip _____

RIDER TWO ADDRESS – Same as owner (please check) ☐ If not, list below:

Address _____

City/State/Zip _____

RIDER THREE ADDRESS – Same as owner (please check) ☐ If not, list below:

Address _____

City/State/Zip _____

TRAINER _____ PFHA Mem # _____ USEF Mem # _____

Address _____ City/State/Zip _____

Cell # _____ Email _____

Total Entry Fees from Above

USEF Fee @ \$23 (DM-\$15/USEF-\$8)	23.00
USEF Show Pass Fee _____ People x \$45	
USEF Membership _____ People x \$80	
PFHA Membership Fees	
PFHA Affidavit Fee _____ x \$40	
_____ Horse Stalls x \$ _____ ea.	
_____ Tack Rooms x \$ _____ ea.	
_____ Shavings x \$ _____ ea.	
_____ RV Fees x \$ _____ ea.	
_____ Visiting Horse Fee x \$ _____ ea.	
Other	
TOTAL FEES	

All Entries must be Paid In Full when entries are made

All Faxed entries must be Paid In Full with a Credit Card

If paying with credit card, please complete the Credit Card Form and submit with your entries.

NOTE: If entered in A/O class, please give relationship of rider to owner: _____

If rider or an immediate relative is not the current owner of record, but is in process of purchasing the horse, an Affidavit of Sale form, with all required signatures, must be included with your entry.

Stable With: _____

- ☐ With
☐ Near

Office Use Only:

Date Rec'd. _____ Amt. Rec'd. \$ _____ Ck # _____ From _____ Bal. \$ _____ C.C. Approval # _____

C.C. - V - MC - AmEx - Disc Date run _____



WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Equestrian Federation, Inc. dba US Equestrian ("USEF") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, official, trainer or volunteer) in a USEF sanctioned, licensed or approved event or activity, including but not limited to equestrian clinics, practices, shows, competitions and related or incidental activities and _____ ("USEF Event" or "USEF Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "**Agreement**"):

A. **RULES AND REGULATIONS:** I hereby agree to be bound and abide by the rules, regulations, and policies of USEF as published in the USEF Rule Book and on the website at www.usef.org, as amended from time to time.

B. **ACKNOWLEDGMENT OF RISK:** I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any USEF Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the USEF Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("**Risks**").

EQUINE ACTIVITY LIABILITY ACT WARNING:

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK.

Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

C. **ASSUMPTION OF RISK:** I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the USEF Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any USEF Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any USEF Event.

D. **WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY:** In conjunction with my participation in any USEF Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: USEF, USEF Recognized Affiliate Associations, the United States Olympic & Paralympic Committee (USOPC), USEF clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any USEF Event; any charity or other beneficiary which may benefit from the USEF Event; the owners, managers, or lessors of any facilities or premises where a USEF Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (**Individually and Collectively, the "Released Parties" or "Event Organizers"**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("**Liability**") which may arise out of, result from, or relate in any way to my participation in the USEF Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

E. **COMPLETE AGREEMENT AND SEVERABILITY CLAUSE:** This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any USEF Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

PARTICIPANT:

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR/OFFICIAL/STAFF/VOLUNTEER
(mandatory)

Signature: _____

OWNER (mandatory)

Signature: _____

Print Name: _____



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 _____ (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. 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.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any USEF Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and 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.

RIDER/DRIVER/HANDLER/VAULTOR/LONGEUR (mandatory)

Signature: _____

Print Name: _____

TRAINER (mandatory)

Signature: _____

Print Name: _____

OWNER/AGENT (mandatory)

Signature: _____

Print Name: _____

COACH (mandatory)

Signature: _____

Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultor/Longeur is a minor) _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____

Is Rider/Driver/Vaultor a U.S. Citizen: ☐ Yes ☐ No

PIEDMONT PFFHA WAIVER AND RELEASE OF LIABILITY

The Piedmont Paso Fino Owners and Breeders Association DISCLAIMER and HOLD HARMLESS AGREEMENT Name and Date of Competition: **The Clemson Classic, July 25, 2020** hereinafter : Event

This form must be signed by every person seeking access to the Event venue and every Event participant or if a minor, their consenting parent, including each person who rides with a driver on a carriage not only during the actual Event but including any time from arrival at the Event venue to departure. I understand and agree that neither The Piedmont Paso Fino Owners and Breeders Association ("PPFHA") and its officers, directors, Event judges, officials, workers, volunteers or organizing committee nor the property owners accept or shall have any responsibility of any nature whatsoever for accidents, damage, injury or illness (including communicable diseases) to the horses, owners, riders, drivers, grooms, passengers, attendants, spectators, volunteers, officials, or any other person or property in connection with the Event. I hereby expressly agree without any limitation or condition for myself and my principals, representatives, employees, agents and assigns:

- 1) To be bound by the rules and bylaws of the PPFHA and by any directives, executive orders and regulations of federal and state and local governance in effect at the location of the Event;
- 2) That every horse, driver, attendant, groom and/or passenger is eligible as entered;
- 3) To accept as final any decision of the Event officials on any question arising under the PPFHA rules and bylaws or any local rules of the Event; and
- 4) I also agree, without any limitation or condition, to hold the PPFHA, its officers, directors, employees and agents, and Competition judges, officials, volunteers and organizing committee, harmless from any and all liability, loss, claims or actions, causes of action, judgments or demands of any nature whatsoever, and specifically as they may be the result of communicable diseases.

I am fully aware and appreciate that equine sports, including this Event, involve inherent dangerous risk of serious injury or death. By participating I do so voluntarily and expressly assume any and all risks of injury to me or loss of my horse(s) or equipment. I agree to release and voluntarily waive the right to sue the PPFHA, its officers, directors, employees, and agents, stewards, Event judges, personnel, volunteers, officials, and organizing committee, including their agents and employees from and against all claims for damages, including money damages, for any action taken or otherwise any harm caused by me or my horse to others, including whether arising from directly or indirectly from the negligence of the PPFHA or the Event or the Event organizer. I agree to indemnify and hold harmless the PPFHA, its officers, directors, employees, clinicians, members, volunteers, coaches, representatives, assigns, Event judges, officials and organizing committee, their agents and employees from any and all claims for loss or injury caused by me or my horse that occur during or in conjunction with this Event. I also agree that as a condition of and in consideration of acceptance of entry, the PPFHA and/or this Event may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of this Event for the promotion, coverage or benefit of the Event, sport, or the PPFHA.

ACKNOWLEDGMENT OF RISK: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know equestrian activities are inherently dangerous, and that participation in any PPFHA Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including PPFHA Disclaimer and Hold Harmless Agreement 6.4.20 communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, Event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the PPFHA Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I have read and understood the state's Equine Liability Act for the Event location.

ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the Event, or the negligent acts or omissions of the PPFHA, the Organizers and other released parties identified herein, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in the Event. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at this Event.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS. BY SIGNING BELOW, I AGREE to be bound by all applicable PPFHA rules and all the terms and conditions of this DISCLAIMER and HOLD HARMLESS AGREEMENT.

Participant/Attendee Name: _____

Phone(s): _____ Email: _____

Address: _____

Participant/Attendee Signature (Parent's name and signature if participant/attendee is a minor):

_____ Date: _____

Piedmont PFHA Stall Reservation/RV Site Reservation From

All stall reservations must be paid in advance with a credit card or check. Request will be placed in the order (date and time) that full payment is received. Refunds will only be made if the cancellation is accompanied by a veterinarian excuse. Stalling preferences cannot be guaranteed, but we will do our best to accommodate.

NAME: _____

STALL WITH: _____

OF STALLS: _____ #RV SITES: _____

ARRIVAL DATE: _____ DEPARTURE DATE: _____

EXTRA SHAVINGS (3 BAGS INCLUDED W/ STALL:

IF YOU WOULD LIKE FOR STALLS TO BE SPLIT ON SHOW BILL – PLEASE FILL OUT INFORMATION BELOW:

OWNER NAME	#STALLS	#SHAVINGS
TOTAL		

PLEASE FILL OUT CREDIT CARD AUTHORIZATION FORM OR ENCLOSE CHECK PAYABLE TO: PPFHA – CHECK CAN BE USED AT SHOW, BUT CREDIT CARD FORM MUST BE FILLED OUT AND SENT IN WITH NOTE THAT CHECK WILL BE PROVIDED AT SHOW IN PLACE OF CREDIT CARD