

South Dakota Spring Thaw Show Entry Form -- Show Date: May 18 & 19, 2019 -- Pre Entry Date: May 1, 2019

4) Registered Name of Horse _____ Registration # _____ AMHR ASPC ASPR NSPPR
 Sex _____ DOB _____ Owner/Lessee _____ City,State _____

<i>Exhibitor's Name</i>	<i>Membership #</i>	<i>Youth or Amateur</i>	<i>Youth DOB</i>											<i>Classes</i>

The following must accompany each entry or will be processed as late entry:
 Copy of Each Horse's Registration Papers, Amateur Cards & Youth Cards of Exhibitors

Office Fee (per Horse per Registry) _____ x \$ 10 = _____
 Open Classes & Liberty _____ x \$ 30 = _____
 Unlimited Classes w/o liberty _____ x \$ 75 = _____
 Unlimited Classes with liberty _____ x \$ 85 = _____
 Stall Fee _____ x \$ 50 = _____
 Shavings _____ x \$6.50 = _____
 Class Sponsorship _____ X _____ x \$ 25 = _____
 RV Parking per day _____ x \$ 30 = _____
 Total Amount Enclosed \$ _____

Make Checks Payable to: **South Dakota Miniature Equine Club**

Mail Entries by Pre Entry Date to: **Tracey Slagle**
2793 16th Road
Central City, NE 68826

Stabling Request: _____

In Case of emergency, we are staying at: _____

VISA & MC WILL BE ACCEPTED AT THE SHOW **WITH THE CARD**
 5% CHARGE FOR CARD USE

**NO REFUNDS OR EXCHANGE OF HORSE
 WITHOUT VETERINARIAN'S STATEMENT**

This show is approved and conducted under the rules of the ASPC/AMHR and is open only to horses registered with the ASPC/AMHR. I hereby enter these horses in the listed classes, by so entering I agree to abide by and be bound by all rules and regulations of ASPC/AMHR, agree to hold harmless the managers and sponsors of the show from all liability in case of accident, theft, injuries or loss in any way associated with my participation in this event. **Under South Dakota law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to §42-11.**

THIS FORM MUST BE SIGNED BY THE EXHIBITOR IN ORDER TO PARTICIPATE IN THE SHOW.

My signature is proof that I have read, understand and accept this statement.

 Authorized Signature

 Parent or Guardian signature (required for all Youth Exhibitors)

 Date

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Complete the following if you are competing for USEF Points. Each Exhibitor (and Parent Guardian if exhibitor is a minor), Owner (or agent) and Trainer must sign an entry agreement

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Federation must be brought in New York State.

RELEASE, 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 to the following: I AGREE that the "Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

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 hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and 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 while at the Competition. I have read the Federation Rules about protective equipment, including GR801 and, if applicable, EV114 and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation 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 all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

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 Federation on the official USEF accident/injury report form.

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.

Exhibitor Information (Required)

Name	Signature	USEF Number	Parent or Guardian Name (if Exhibitor is a minor)	Parent or Guardian Signature	US Citizen?
					Yes No
					Yes No
					Yes No
					Yes No
					Yes No

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Owner (or Agent) and Trainer Information (Required)

Name	Signature	USEF Number

Horse Information (Required)

Horse Name	USEF Number