

* Each Exhibitor for horse must have a Release Form on File before entries can be accepted. *

Waiver of Liability, Indemnification, and Medical Release

I am aware of the danger involved in participating in the Center of the Nation Appaloosa Horse Club Spring Spotacular Horse Show.

On behalf of myself, my executors, administrators, heirs, next of kin, successors, and assigns, I hereby:

- a. waive, release and discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me and my estate, the Center of the Nation Appaloosa Horse Club, and its officers, agents, and employees; and
- b. indemnify and hold harmless the Center of the Nation Appaloosa Horse Club, and its officers, agents and employees from and against any and all liabilities and claims made by other individuals or entities as a result of any of my actions during this activity or event.

I hereby consent to receive any medical treatment which may be deemed advisable in the event of injury, accident or illness during this activity or event.

This release and waiver shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I, the undersigned participant, acknowledge that I have read and understand the above release.

Name : _____ Birth date: _____

Signature: _____ Date: _____

Permission for Minor to Participate:

I hereby consent to the entry of _____ Birth date: _____
in this horse show and certify that I have read the forgoing statements and that the same may be deemed a part herof, and hereby accept responsibility hereunder for the participation of the said minor. I am either the parent or the horse agent that is responsible for the said minor for the above named horseshow.

Signature: _____ Date: _____

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NUMBER OF EXHIBITORS FOR HORSE: _____
NUMBER OF RELEASES RECEIVED (ONE PER EXHIBITOR): _____

*If numbers and names do not match we cannot take your entry. *Extra Releases are available at the Show Office.

HORSE INFORMATION

Reg. Name _____ Reg. # _____ Sex _____ Yr Foaled _____ BACK # _____
 Owner (Last) _____ (First) _____ ApHC # _____
 Phone (____) _____ Address _____ City _____ St _____ Zip Code _____
 Email _____

OPEN EXHIBITOR

Name (Last) _____ (First) _____ ApHC # _____
 Phone (____) _____ Address _____ City _____ St _____ Zip Code _____
 Email _____

Class #'s
 | | | | | | | | | |

NON PRO EXHIBITOR

Name (Last) _____ (First) _____ ApHC # _____
 Phone (____) _____ Address _____ City _____ St _____ Zip Code _____
 Owner Relationship To Exhibitor _____ Non Pro Birthdate _____
 Email _____

Non Pro Class #'s
 | | | | | | | | | |

YOUTH EXHIBITOR

Name (Last) _____ (First) _____ ApHC # _____
 Phone (____) _____ Address _____ City _____ St _____ Zip Code _____
 Owner Relationship To Exhibitor _____ Youth Birthdate _____
 Email _____

Youth Class #'s
 | | | | | | | | | |

Package Deal Package @ \$140 per horse flat fee	Non-Package Deal	Charges
Open classes ___ @ \$2 nat'l pt fee/class/judge	Open classes ___ @ \$10/class/judge	
Non Pro classes ___ @ \$1 nat'l pt fee/class/judge	Non Pro classes ___ @ \$8/class/judge	
Youth classes ___ @ \$1 nat'l pt fee/class/judge	Youth classes ___ @ \$8/class/judge	
Tack Stalls ___ @ \$55 per stall	Stalls ___ @ \$55 per stall	
	Tack Stalls ___ @ \$55 per stall	
Cattle Charge ___ \$8 per run **	Cattle Charge ___ \$8 per run **	
CON Membership ___ @ \$10/\$20/\$30	CON Membership ___ @ \$10/\$20/\$30	
Office Charge ___ @ \$5	Office Charge ___ @ \$5	
Total	Total	

** Cattle Charge on Classes 63, 64, 65, 66, 67, 68, 70, 73, 74, 76, 77, 78, 79, 81, 82

Amount Paid \$ _____ Check (# _____) /Cash/Other