

**Entry Closing:**  
 Jan 9, 2025  
 See premium for  
 post entry requirements

**SCHAA HORSE SHOW**  
 Arabian & HA/AA Horse Show  
 Jan 17 - 19, 2025

**Mail Entry & Fees to:**  
 Nancy Harvey  
 490 E Montecito Ave.,  
 Sierra Madre, CA 91024  
 schaashowsecretary@gmail.com

of horse's registration papers (both sides) n E

purchase contract (if applicable), amateur certification (if applicable) AHA competition level cards for each rider, driver, handler and owner.

Name of Horse	Registration #	Date of Birth	Sex	Color	Height
Sire	Dam				
Rider/Driver/Handler	AHA #	Class #			Entry Fees \$
If Minor indicate Birth-date here:					
Rider/Driver/Handler	AHA #	Class #			Entry Fees \$
If Minor indicate Birth-date here:					
Rider/Driver/Handler	AHA #	Class #			Entry Fees \$
If Minor indicate Birth-date here:					
Rider/Driver/Handler	AHA #	Class #			Entry Fees \$
If Minor indicate Birth-date here:					

FOR MORE THAN FOUR RIDERS WITH SAME HORSE, USE ADDITIONAL ENTRY FORM, LEAVING HORSE DATA BLANK. OWNERS ENTERING MORE THAN ONE HORSE, USE ADDITIONAL ENTRY FORMS

Each person signing this entry form acknowledges that he/she has read the front and reverse side of this official entry form and agrees to the applicable terms, conditions, waivers, releases, indemnification and consents set forth herein. Each person agrees that information is accurate to the best of his/her knowledge.

**OWNER** (Exactly as it appears on horse registration papers or contract)

Name \_\_\_\_\_ AHA# \_\_\_\_\_  
 Farm/Ranch \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ e-mail: \_\_\_\_\_

**TRAINER**

Name \_\_\_\_\_ AHA# \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ e-mail: \_\_\_\_\_

**AMATEUR CERTIFICATION** (For amateurs in all amateur and amateur owner classes)

Name \_\_\_\_\_ USEF Amateur# \_\_\_\_\_  
 Age \_\_\_\_\_ Relationship to horse owner \_\_\_\_\_

**STABLING INFORMATION**

Owners, Trainers, Coach, Riders, Drivers & Handlers (or parent if rider, driver or handler is a minor) must sign an AHA release on reverse of this form.

Send Money with Zelle®  
 SOUTHERN CAL HALF ARABIAN



**ZELLE CODE  
 NO CC FEES**

Zelle

<b>Total Entry Fees</b>	\$ _____
___ Horse Stall @ \$140	\$ _____
___ Tack Room @ \$140	\$ _____
___ Grounds Fee @ \$35/horse (only horses without a stall)	\$ _____
<b>Mandatory Fees:</b>	
___ Office Fee @ \$35/horse	\$ _____
___ Calif Drug Fee @ \$14/horse	\$ _____
___ AHA Resolution 9-90* @ \$5/horse <small>DOES NOT APPLY TO OPPORTUNITY ONLY HORSES</small>	\$ _____
___ AHA Results reporting @ \$7/horse <small>DOES NOT APPLY TO OPPORTUNITY ONLY HORSES</small>	\$ _____
<b>Non-Member Fees (AHA)</b>	
___ AHA Single Event Memb Fee @ \$40/person	\$ _____
<b>Optional Fees:</b>	
___ Sponsorships	\$ _____
___ RV Fee (\$50/night)	\$ _____
___ CDS Travel fee @ \$3/Dressage Horse	\$ _____
<b>Post Entry Penalties</b>	
___ Post Entered Horse	\$ _____
___ cc Fee 4%	\$ _____
<b>Total Fees</b>	\$ _____

**Make checks payable to SCHAA**

**Credit Card Info:**

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Zip Code \_\_\_\_\_ Exp Date \_\_\_\_\_ CV Code \_\_\_\_\_

**AHA ENTRY AGREEMENT**

I have read the rules concerning competitions as printed in the Arabian Horse Association (AHA) Handbook / Directory and Competition Prize List and agree to be bound by and subject to those Rules.

**AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION This document waives very important legal rights. Read it carefully before signing.**

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

**I AGREE** that I choose to participate voluntarily in this Competition, as a rider, driver, handler, lessee, owner, agent, coach, trainer, junior exhibitor, or as a parent or guardian of a junior exhibitor. **I AM FULLY AWARE AND ACKNOWLEDGE THAT HORSE SPORTS AND PARTICIPATION IN THIS COMPETITION INVOLVE SERIOUS RISK OF HARM INCLUDING, BUT NOT LIMITED TO, RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN, AND SUFFERING, AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF HARM TO ME, MY HORSE OR MY PROPERTY.**

**I AGREE** as a Horse Show Participant (or Parent/Guardian of Participant if a minor) to waive all claims which may otherwise arise from, including but not limited to infectious bacteria, viruses, fungi/mold, parasites or other agents which may be present at the Horse Show (and most other outdoor locations) and can cause infection in humans, as well as in animals.

**I AGREE** for myself, my heirs, executors, administrators, successors and assigns to release AHA, the Competition, the facilities leased by the Competition and the owner(s) of the facilities, and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me to the fullest extent permitted by law that arises out of or relates in any way to the Competition and my participation in the Competition INCLUDING, BUT NOT LIMITED TO, DAMAGES, LOSS, OR INJURY RESULTING FROM ANY ACTS, FAILURE TO ACT, NEGLIGENCE OR NEGLECT OF OTHER ENTRANTS, THE RELEASED PARTIES, THEIR CONTRACTORS OR INVITEES, as well as for theft, vandalism, fire, other casualty damage, or damage arising out of any defects in the premises.

**I AGREE** to indemnify and hold harmless (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorneys fees) of whatsoever kind and nature, which may be asserted against or incurred by any of them as a result of (1) my participation in the Competition or (2) any act, failure to act, or neglect (a) by me, my agents, employees, riders, handlers, trainers, coaches, drivers, contractors or invitees, or (b) by any animal owned or exhibited by me or in my custody or control.

**I AGREE** and represent that I am qualified and eligible to enter and/or participate in the Competition, and every horse I am entering is qualified and eligible as entered.

**I AGREE** to accept AS FINAL any decision of AHA, the Show Commission or Show Officials concerning my qualification or the qualification of my horse to enter the Competition or any results of the Competition, except to the extent that the Rules of AHA, the Competition, EC or USEF Equestrian permit a protest or hearing of such decisions. Should a hearing be requested, I agree to accept AS FINAL the decision of the particular hearing body. I agree to release, hold harmless and not to sue AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Show Commission, Show Officials or any hearing body that relates to my qualifications or my horse(s)' qualifications to enter the Competition or any results of the Competition.

**I AGREE** that AHA has the sole right to control, sell, supervise or give away (or assign to others the right to do so) the exclusive rights to broadcast, televise, reproduce, transmit and disseminate all or part of this event, and I agree that AHA may use or assign, in any way AHA sees fit, photographs, films, videos, audios, cablecasts, or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition or AHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way which implies endorsement of any company, product, product category or service. 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.

**By signing below** as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions, and further agree to assume all of the obligations of this AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child.

This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain effect.

**BY SIGNING BELOW, I AGREE** that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time, as well as 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.

Owner <b>** Mandatory Must be Adult</b>	Print Name	**Adult Signature
Trainer or Custodian of horse @ show <b>** Mandatory Must be Adult</b>	Print Name	**Adult Signature
Rider 1 <b>** Mandatory Must be Adult</b>	Print Name	**Adult Signature
Rider 2 <b>** Mandatory Must be Adult</b>	Print Name	**Adult Signature
Print Minor Name Here	Print Parent/Guardian Name Here	**Adult Signature
<b>***** EMERGENCY PHONE NUMBER FOR EXHIBITOR</b>		