



LA National - Outreach

Oct. 13-17, 2021

Entries can be submitted through EquestrianConnect.com or emailed to ak@westpalmsevents.com.

Entries are due by Sept. 3, 2021

OWNER		RIDER ONE		TRAINER	
Owner Name		Rider Name		Trainer Name	
Address		Address		Address	
City/State/Zip		City/State/Zip		City/State/Zip	
Social Security # (if corporation see below)	Telephone	Telephone	E-Mail	Telephone	E-Mail
E-Mail	PCHA	USEF/USHJA		USEF/USHJA	
USEF/USHJA	ASPCA	PCHA	ASPCA	PCHA	PCHA

PRIZE MONEY PAID TO		RIDER TWO		PAYMENT INFO	
Individual Name (one name only) or Corporation Name		Rider Name		Credit Card #	
Social Security #	Address	Telephone	Cardholder Name	Exp.	CVV#
Fed #	City/State/Zip	E-Mail	Signature	Billing Zip	
Address	USEF/USHJA	Deposit Received \$	Ck#	Date	
City/State/Zip	PCHA	ASPCA	Closeout \$	Ck#	Date

NAME OF HORSE					RIDER ONE		CLASSES								
	COLOR	SEX	HEIGHT	AGE	Birthday		RIDER 1								
Please circle below if applicable					RIDER TWO			RIDER 2							
USHJA#	1st Yr	2nd Yr	Sm	Med	Lg	Birthday									

By signing below as owner, agent, rider, handler, lessee, trainer, coach or as parent or adult guardian of a minor, I am fully aware and acknowledge that horse sports and competitions involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering and/or death ("Harm"). By signing below, 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. If I am signing 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 agree to assume all of the obligations of this release on the child's behalf. I agree that the term "competition" as used above includes, but is not limited to, the horse show, West Palms Event Management and LEG Shows & Events, its officials, officers, directors, employees, contractors, agents, personnel, volunteers and affiliated organizations, as well as the facility (Flintridge Riding Club).

ASSOCIATION FEES	
USHJA FEE	\$2.00
CDFA DRUG FEE	\$8.00

HORSE SHOW FEES	
STALL	\$300.00
STALL After Sept. 3	\$325.00
OFFICE/GROUNDS FEE	\$75.00
NOMINATION LEVEL 1	\$75.00
NOMINATION LEVEL 2	\$75.00
NOMINATION LEVEL 3	\$125.00
FACILITY FEE	\$50.00
HAUL IN (PER DAY/PER HORSE)	\$50.00
RV	\$500.00
3% CREDIT CARD FEE	

RIDER/HANDLER (Mandatory) Is Rider/Driver/Handler a U.S. citizen? (please circle) Yes No Signature: _____ Print Name: _____	OWNER/MANAGER (Mandatory) Signature: _____ Print Name: _____	TRAINER (Mandatory) Signature: _____ Print Name: _____
RIDER/HANDLER (Mandatory) Is Rider/Driver/Handler a U.S. citizen? (please circle) Yes No Signature: _____ Print Name: _____	PARENT/GUARDIAN (Mandatory if rider/handler is a minor) Signature: _____ Print Name: _____	COACH (If applicable) Signature: _____ Print Name: _____

Please refer to the rules and regulations for complete details.

SEND ONLY NOMINATION AND STALL/TACK FEES WITH ENTRY
TOTAL AMOUNT DUE

EMERGENCY CONTACT
Name: _____ PHONE: _____

ENTER ONLINE AT: www.westpalmsevents.com

STABLE WITH: _____