

Thoroughbred Classic Horse Show Series • March 21-22, 2020

Galway Downs • Temecula, CA
Entries Due By: March 14, 2020

| OWNER OR AUTHORIZING AGENT | | | |
|---|--|--|--|
| Owner Name: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | | |
| Email: | | | |
| | | | |
| Prize Money Information Must be Completed Below or Prize Money Will be Withheld | | | |

Make Checks Payable To:
TCHS
285 W. Huntington Dr., Arcadia, CA 91007
626.574.6654

Online Entry: www.horseshowtime.com

| RIDER ONE | | | |
|-----------------|--|--|--|
| Rider Name: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | | |
| Email: | | | |
| TIP #: | | | |
| | | | |

| PRIZE MONEY PAID TO | | HORSE | |
|---------------------|--|-------|--|
|---------------------|--|-------|--|

| | | | |
|------------------|--|--|--|
| Individual Name: | | | |
| SS#: | | | |
| Corporation: | | | |
| FED ID#: | | | |
| Address: | | | |
| City/State/Zip: | | | |

| | | | |
|---------------------------|--|--|--|
| Horse's Jockey Club Name: | | | |
| Horse's Show Name: | | | |
| Horse's DOB: | | | |
| Adopted from: | | | |
| Adoption Date: | | | |
| Tattoo #: | | | |
| Sex: | | | |

* Each Rider/Horse combination must have unique TIP to participate in TIP Program

| TRAINER | |
|---------|--|
|---------|--|

| | | | |
|-----------------|--|--|--|
| Trainer Name: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | | |
| Email: | | | |

| RIDER TWO | | | |
|-----------------|--|--|--|
| Rider Name: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | | |
| Email: | | | |
| TIP #: | | | |
| | | | |

* Each Rider/Horse combination must have unique TIP to participate in TIP Program

| | | |
|-----------|------|--|
| RIDER ONE | DOB: | |
| RIDER TWO | DOB: | |

| Classes | | | | |
|---------|--|--|--|--|
|---------|--|--|--|--|

| | | | | |
|--|--|--|--|--|
| | | | | |
| | | | | |
| | | | | |

THIS ENTRY BLANK CONSISTS OF TWO PAGES – READ BOTH PAGES CAREFULLY AS IT IMPACTS YOUR LEGAL RIGHTS.

Tax Identification Number: Under penalty of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me). (2) I am not subject to backup withholding either because I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends or the IRS has notified me that I am no longer subject to backup withholding.
Federation 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 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, and agree that any actions against the Federation must be brought in New York State. I represent that I am eligible to enter and/or participate under the Rules, and that every horse I am entering is eligible and sound as entered.
Release, Assumption of Risk, Waiver and Indemnification. This document waives important legal rights. Read it carefully before signing.
 For the purpose of this Agreement, as used herein "the Federation" and "Competition" shall refer to any Thoroughbred Classic Horse Show Series "TCHS" event, and any Release, Assumption of Risk, Waiver, and/or Indemnification to which I agree or offer shall extend and intentionally be conveyed to the Licensees and Competition Management, including the Thoroughbred Classic Horse Show Series "TCHS", California Retirement Management Account "CARMA", LAEC Incorporated, Galway Downs LLC, its agents and employees (as more fully defined on Page 2 this entry blank).
 In consideration for my participation in the Thoroughbred Classic Horse Show Series:
 I OFFER and AGREE to assume all risks associated with my participation and to waive any known and unknown claims/risks arising from such participation. I hereby acknowledge that I have chosen to participate voluntarily in this TCHS event as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, volunteer, or as a parent or guardian of a junior exhibitor. I am fully aware and acknowledge that participation in 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 OFFER and AGREE to hold harmless and release the Federation, the Competition, and CARMA, from all claims for money damages or otherwise for any injury or other harm of any nature to me or my horse, and for any injury or harm caused by me or my horse to others, even if the injury or harm resulted, directly or indirectly, from the acts or failure to act, including but not limited to negligent conduct, of the Federation or the Competition.
 I OFFER and AGREE to indemnify, including but not limited to, the payment of any losses, damages, or costs incurred by the Federation, Competition, and CARMA, and to hold harmless with respect to claims for Harm to me or my horse 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 and expected to wear protective equipment without penalty. I acknowledge that the Federation strongly encourages me to do wear suitable and adequate protective equipment even though such equipment cannot guard against all potential injuries. For those reasons I make the OFFERS and AGREEMENTS as herein set forth.
 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.
 I represent that I have the requisite training, coaching and abilities to safely compete in this competition.
 As the parent and/or guardian of a junior exhibitor/participant, I hereby consent to all of the terms and conditions set forth herein, and further AGREE to assume all of the obligations contained in this Release as they relate to participants on the child's behalf.
 BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this ENTRY BLANK including But Not Limited to Page 2 (two) and all provisions and rules of the 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.

| HORSE SHOW FEES | | | |
|-----------------|--|--|--|
|-----------------|--|--|--|

| | |
|--------------------------------------|----------------|
| Total Entry Fees | _____ |
| # of Stalls/Tackrooms | \$150/stall |
| CDFA Drug Fee | \$8 |
| Office Fee | \$25 |
| | \$30 |
| | _____ |
| | _____ |
| Early Arrival Fee (Thursday Arrival) | \$50 |
| Haul-Ins | \$40/horse/day |
| | _____ |
| | _____ |
| Sub Total | _____ |

| CARMA | |
|-------|--|
|-------|--|

| | |
|----------------|-------|
| CARMA donation | _____ |
| | _____ |

| Rider/Handler (Mandatory) | |
|---------------------------|-------|
| Signature: | _____ |
| Print Name: | _____ |
| Rider/Handler (Mandatory) | |
| Signature: | _____ |
| Print Name: | _____ |

| Owner/Agent (Mandatory) | |
|---|-------|
| Signature: | _____ |
| Print Name: | _____ |
| Parent/Guardian (Mandatory if rider/handler is a minor) | |
| Signature: | _____ |
| Print Name: | _____ |
| Emergency Contact #: | _____ |

| TOTAL AMOUNT DUE: | |
|---------------------|-------|
| Check # | _____ |
| Trainer (Mandatory) | |
| Signature: | _____ |
| Print Name: | _____ |
| Stable Next To | |
| | _____ |

ADDITIONAL TERMS AND DEFINITIONS OF THE RELEASE OF LIABILITY, ASSUMPTION OF RISK, WAIVER AND INDEMNIFICATION.

In consideration for entry upon the SHOW GROUND FACILITIES of the COMPETITION, the undersigned on behalf of myself, my trainers, instructors, coaches, clients, agents, employees, grooms, invitees, representatives, assigns, executors, heirs, independent contractors (including but not limited to veterinarians, farriers, masseuse, chiropractor, therapists, braiders, shippers), and, if applicable, on behalf of my minor child or children (hereinafter collectively referred to as "I") agree:

I agree that COMPETITION as used in this entry blank, in the prize list, and in the USEF rules means Thoroughbred Classic Horse Show Series, each and every class and/or event conducted and ALL ACTIVITIES that I undertake AT ANY TIME and for any purpose upon entry of the SHOW GROUND FACILITIES including any horse which is on the SHOW GROUND FACILITIES for my use, in my control or at my request. I further agree that COMPETITION includes the entire week of the horse show including the time horses and/or people are allowed to enter to set up, stable and/or conduct business whether its expressly and/or specifically related to the horse show and classes being conducted/held that week through and including the time all horses and/or people vacate the SHOW GROUND FACILITIES.

I agree that this Release of Liability includes any horse that I have asked to come onto the SHOW GROUND FACILITIES for any purpose, and/or is in my control and/or custody and regard-less whether the horse is being stabled at the SHOW GROUND FACILITIES and/or competing in the COMPETITION.

I agree that "RELEASED PARTIES" means the "Competition" known as Thoroughbred Classic Horse Show Series, the "Horse Show Management" and/or " Competition Management" as referenced in the prize list, the Federation Licensee, California Retirement Management Account "CARMA", Galway Downs LLC, its agents, and employees and each of their officers, directors, managers, members, owners, shareholders, employees, representatives, agents, subsidiaries, volunteers, officials, affiliated and associated persons, companies and organizations, assigns and entities or organizations as may now or hereafter be constituted, that own, are related to or manage the property owned by such entities.

I agree that SHOW GROUND FACILITIES means Galway Downs including but not limited to all improvements, structures (permanent or temporary), buildings, tents, stalls, fixtures (including but not limited to all jumps and related equipment), arenas (and the footing therein) located on the premises and/or provided by RELEASED PARTIES during the COMPETITION.

I agree that whether or not I am a member of the Federation that I will abide by all rules and regulations of the Federation. I agree that the Rules of the Prize List are incorporated as if set forth herein.

RELEASE AND WAIVER OF CLAIMS: I hereby fully and forever release, waive and discharge the RELEASED PARTIES and each of them who are or might be liable in any way from any and all claims, demands, actions, causes of actions, liabilities of any kind which I may or might have against RELEASED PARTIES or any of them, arising from or by reason of any and all known and unknown, foreseen or unforeseen bodily and personal injuries, damage to property, injury to horse and any consequences thereof, which I may sustain due to the negligence of RELEASED PARTIES; I further agree that, except for the gross negligence or willful misconduct of the RELEASED PARTIES, I SHALL NOT SUE or bring any legal action, claim, and/or demand against for any economic and non-economic losses due to bodily injury, death, property damage and/or injury to any horse in relation to the SHOW GROUND FACILITIES and/or the operation and conduct of the COMPETITION. I agree this RELEASE INCLUDES ALL ACTIVITIES I PARTICIPATE IN AND ALL AREAS OF THE SHOW GROUND FACILITIES as defined above. This release also includes all activities I conduct at the SHOW GROUND FACILITIES and includes all times that I am at the SHOW GROUND FACILITIES no matter what the purpose and/or activity being undertaken.

HOLD HARMLESS: I hereby agree to defend, indemnify, and hold harmless the RELEASED PARTIES from and against any and all claims, liabilities, loss, damages, demands, actions, causes of action, including attorneys' fees, cost and expenses of any kind, which may be made against them, or any of them, which arise out of the active or passive negligence of RELEASED PARTIES while either I or any horse at my request or in my control is/was on the SHOW GROUND FACILITIES and/or participating in the COMPETITION. I agree to defend RELEASED PARTIES, at my expense, regardless if RELEASED PARTIES are negligent or not.

ASSUMPTION OF RISK: I hereby acknowledge that any and all forms of equestrian activity can be very dangerous and involves risk of serious injury and/or death and/or property damage. I hereby expressly assume all risks, known and unknown associated with any equestrian activity, including jumping, relating to the SHOW GROUND FACILITIES and/or competing in the COMPETITION. I further expressly acknowledge and agree that such injuries may be compounded or increased by maintenance of the SHOW GROUND FACILITIES, faulty or improperly secured equipment, improper supervision or compliance with Federation rules and regulations, Acts of God and negligent rescue operations or procedures of RELEASED PARTIES and/or the negligent handling of horses and independent operations by trainers, riders and/or boarders who use the SHOW GROUND FACILITIES or others who are not affiliated with RELEASED PARTIES. I acknowledge that horses can be injured while being ridden, groomed, stabled, walked and/or exercised, and I therefore expressly assume all risks of injury to any horse under my control and/or custody or on the SHOW GROUND FACILITIES at my request.

I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment on the official USEF accident/injury report form.

This agreement shall be governed by the laws of the State of California, except for the Federation as set forth on page one. I agree this Release extends to all acts of ordinary negligence of RELEASED PARTIES and is intended to be as broad and inclusive as permitted by law. If any portion of this Release and/or Entry Blank is held invalid, it is agreed that the balance shall continue in full legal force and effect. I have not relied on any oral representations or statements made that are contrary to or modify the above Release or warnings. I agree that by signing the front page of this Entry Blank I am bound by the Release, waiver, and warnings contained herein and that both sides/pages constitute one incorporated agreement. I agree I have the express authority to sign this entry blank/Release on behalf of the owner and/or rider.