FALL FESTIVAL ENTRY FORM SEPTEMBER 06, 2008

Entries must be submitted to the entry booth no later than ½ hour before the start of a show (for the first 5 classes) or at least 5 classes ahead of time. Additional or dropped classes must be submitted on an Add/Drop form. Refunds for dropped classes will only be given for medically excusable injury or incident, or if the drop is made to the entry booth at least 5 classes prior to the dropped class and is accompanied with a Drop form.

Check Name & Number		**Back Number**	
Horse's Name			
Registration Number		**Owner's telephone number:**	
Gender (please check one)	□ Mare □ Gelding □ Stallion	Trainer's Name	
Name of Owner		Street Address	
Street Address		City, State, Zip	
City, State, Zip		Trainer's Number	

Class Number	Class Name	Name of Rider/Handler	Amateur, Youth or Trainer No. for Rider / Handler	Class Fee ($10.00 per Class)

EIA Test Accession #	
State	
Date Taken	
Current Health Certificate	

*** * COPIES MUST BE PROVIDED AT ENTRY TIME * ***

NOTICE: A PERSON WHO IS ENGAGED FOR COMPENSATION IN THE RENTAL OF EQUINES OR EQUINE EQUIPMENT OR TACK OR IN THE INSTRUCTION OF A PERSON IN THE RIDING OR DRIVING OF AN EQUINE OR IN BEING A PASSENGER UPON AN EQUINE IS NOT LIABLE FOR THE INJURY OR DEATH OF A PERSON INVOLVED IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES AS DEFINED IN SECTION 895.481 (1) (e) OF THE WISCONSIN STATUTES.

Total Entry Fees	
Office Fee $8.00 per horse	
_____Stalls @ $20.00	
_____Tack stalls @ $20.00	
Trailer Tie Fee @ $5.00 per horse	
Camping Electricity Per Night $5.00	
Bagged Shavings	**Not available**
Back Number @ $1.00	
Add / Drop sheets	
Total Fees	

Every entry shall constitute an agreement that the person making it, owner, lessee, trainer, manager, agent, coach, exhibitor and the horse shall be subject to the bylaws and the Rules of the NHSC and the local rules of the show. Further it shall constitute a declaration that the horse and/or exhibitor is eligible as entered and that the owner and all his representatives are bound by the bylaws and Rules of the NHSC and the show and accept as final the decision of the Hearing Committee, or the NHSC as the case may be, on any question arising under said bylaws and Rules, and agree to hold the show, the NHSC, their officials, directors and employees harmless for any action taken.

I, the undersigned wish to participate in the Wisconsin Walking Horse Association on 09/06/08. I understand that during portions of this event, I will be in close proximity to one or more horses under circumstances which may expose me to some risk of injury, because of the nature of horses, the facility, and the activities in which I will be engaged.

In consideration of the Wisconsin Walking Horse Association allowing my participation in this event, I, on behalf of myself, and my heirs, administrators, personal representatives, assigns and children and spouse, if any, do hereby agree to hold harmless, release and discharge the Wisconsin Walking Horse Association, which includes its officers, directors, members, agents, representatives, affiliates and insurers of and from all claims, demands, causes of action and legal liability whether known or unknown, anticipated or unanticipated, due to the ordinary negligence of the Wisconsin Walking Horse Association for any damage or loss due to bodily injury, death or property damage arising out of my participation in this event.

Signature of Owner / Exhibitor _____Date:_____

(Parent or guardian must sign for minors) Revised 02/27/08