

ARABIAN HORSE BREEDERS ASSOCIATION OF OREGON, 2024 Crazy Ribbon Show

Exhibitor Name: _____ Age as of 01/01/2024: _____

Horse Name: _____ Gender: _____

Owner Information:

Name (Last) _____ (First) _____ Age: _____

Address: _____ City: _____ Zip: _____

Email Address: _____ Phone: _____

Participation Agreement, Notice Release, & Acknowledgement of Risk: I accept and clearly understand that riding a horse can be hazardous, especially in an equestrian event; that there are inherent and other risks involved in riding a horse; and that injuries are a common and ordinary occurrence. I freely accept and assume those risks. I therefore release Oregon Family Equestrian Association (OFEA), Arabian Horse Association of Oregon (AHBAO), its members and show grounds' owners and all of their agents and employees, from any and all liability for damage and injury to myself, my horse, or to any person or property resulting from my riding a horse in this equestrian event, accepting myself the full responsibility for any and all such damage or injury of any kind which may result. I agree to fully indemnify, defend, and hold OFEA, AHBAO, show grounds' owners and all of their agents and employees, harmless from any and all claims, actions, liability, or costs including attorney fees and other costs of defense, arising out of or in any way related to my riding a horse in this equestrian event. The limitations on liability provided in ORS 30.691 shall apply to an adult participant in the circumstances listed in subsection (1)(b) of this section if the participant, prior to riding, training, driving, grooming or riding as a passenger upon an equine, knowingly executes a release stating that as a condition of participation, the participant waives the right to bring an action against the equine professional or equine activity sponsor for an injury or death arising out of riding, training, driving, grooming or riding as a passenger upon the equine. A release so executed shall be binding upon the adult participant. I hereby certify that every horse is eligible as entered. I make these entries at my own risk and understand that equine events are potentially dangerous. Show management, owners of the facility, and/or OFEA shall not be held responsible for any accident, injury or loss that may occur to any exhibitor, their representatives, or to their horses, equipment, or vehicles. Presentation of this entry with my entry fee shall be deemed acceptance of the above. I understand and agree that this show shall be conducted under the rules of Oregon Family Equestrian Association and that of the Show Management.

Owner _____ Date _____

Exhibitor _____ Date _____

Parent/Guardian _____ Date _____

(Parent/Guardian must sign for exhibitors under age 18)

Circle classes entered: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24
25 26 27 28 29 30 31 32 33

OFFICE USE ONLY:

Pre-Entry Class fees (\$10/class or \$100 All day)	_____ X \$10 or \$100 =	_____
Day-of-Show Entry Fees (\$12/class or \$120 All Day)	_____ X \$12 or \$120 =	_____
Office Fee (\$10/Exhibitor)	_____ X \$10.00 =	_____
Stall Fee (\$65/day, \$95/overnight)	_____ X \$65 or \$95 =	_____
Parking Fee (\$10/Vehicle)	_____ X \$10.00 =	_____

TOTAL DUE..... _____

Check # _____ **(Open? Y N) Cash \$** _____ **Show Entry/Back Number Assigned:** _____