

Canada's NATIONAL ARABIAN CHAMPIONSHIP



Brandon, Manitoba  August 7-16, 2025

MAIL ENTRY FORM & FEES TO:

April 10, 2025

National Arabian Breed Society,
Leslie Williams,
43 Skyline Crescent NE,
Calgary, Alberta, Canada T2K 5X2
cnacentries@gmail.com
EC # 250202 Silver
AHA # 251716567

ONLY ONE HORSE PER ENTRY FORM.

All entries must be complete. Enclose copies of horse registration papers (both sides), EC/USEF membership cards & Amateur certification.

For more than ONE horse being entered by same owner please copy additional entry forms and complete each in full with all signatures.

	Name of Horse	Reg. No	DOB	Sex	Color	Class Cost: \$210 incl. taxes	
	Sire	Dam					
Rider/driver/handler	AHA #	Class #s					
Address:	ECF/USEF					\$ _____ Entry Fees	
Rider/driver/handler	AHA #	Class #s					
Address:	ECF/USEF					\$ _____ Entry Fees	

**** Acknowledgement(s) to the "Trainer" or "Owner" will be sent by EMAIL ****

Each person signing this entry form acknowledges that he/she has read the front & reverse of the Entry Form and agrees to the applicable terms, conditions, waivers, releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge. ALL Owners, Trainers, Riders, Drivers & Handlers must sign on the back. **MINOR entrants MUST also have parent/guardian signature(s) on the back of entry form.**

OWNER (as appears on registration papers or contract) MINORS MUST NOT SIGN --MUST HAVE ADULT SIGNATURE

Name _____ AHA # _____

Address _____ EC/USEF # _____

City, Province/State _____ Phone _____

Postal Code/Zip _____ email _____

TRAINER shall be signed by the trainer or person responsible for the care, training, custody & performance of the horse

Name _____ AHA # _____

Address _____ EC/USEF # _____

City, Prov/State, zip &, Phone _____ Coach # _____

Amateur Owner Relationship to Horse Owner _____
*** PLEASE complete relationship to Owner for AOTR classes***

EMAIL ADDRESS: _____
*** Please print LEGIBLY in dark ink. ***

STABLE WITH - _____
Use common stabling name. Requests for "group" stabling must be sent in the same envelope

*******E-TRANSFER** ***** (Canadians Only)

Email to : **etransfercnac@gmail.com** **Total Amount: \$** _____

Reference Riders Name & Horses Registered Name in Memo on Etransfer

*******CREDIT CARD*******

Amount PLUS 5%: _____

Complete Form attached to this Entry Form

Total Amount \$ _____

Sub Total of Class FEES \$ _____

STABLING
14 nights - \$285 \$ _____
Horse & Tack Stalls

Office Fee \$105 \$ _____

EC Drug Fee - \$8.00 \$ _____
(not taxes)
AHA 9-90
(\$25USD + \$12 = \$37 CAD) \$ _____

AHA Show Recognition
(\$10USD + \$5 = \$15 CAD) \$ _____

Show Program
\$25.00 \$ _____

TOTAL:
\$ _____

Entries Close – June 23, 2025

Canadian Entries pay by:
E-Transfer, Cheque or Credit Card+ 5%

USA Entries pay by: (in Canadian funds)
Credit Card +5% or Bank Draft.

Cheques or Bank Drafts made payable to:
National Arabian Breed Society

ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION

This document waives very important legal rights. Read it carefully before signing.

EQUESTRIAN CANADA NOTICE

In the event an exhibitor participates in an Equestrian Canada sanctioned competition where protective headgear is required for juniors, he/she will wear properly fitted and fastened approved headgear at all times while riding or driving at the event location. It is understood that juniors not meeting this requirement will not be allowed to compete at these competitions.

I hereby certify that every horse entered in any class at a competition has met the requirements of Article A519, Vaccinations. See Rules of Equestrian Canada, Section A, General Regulations, Article A519, Vaccinations.

I hereby certify that every horse, rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the Constitution and rules of Equestrian Canada at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless EC, the competition, their officials, organizers, agents, employees and their representatives.

The person responsible (PR) agrees to the release of any information on the entry form to EC.

Print Name of Person Responsible: _____ **Signature of Person Responsible:** _____

EC# for Person Responsible: _____ **Date:** _____

The Person Responsible for a horse must be an adult who has, or shares, responsibility for the care, training, custody and performance of the horse and who has official responsibility for that horse under EC Rules and is liable under the penalty provisions of the Rules for any violation of the EC Rules. For the purpose of these Rules, the Person Responsible is normally the Coach, owner or the competitor who rides or drives the horse during an event, or a parent or legal guardian in the case of junior competitors. The Person Responsible is ultimately responsible for the condition, fitness and management of the horse and is alone responsible for any act performed in the stables by himself or herself or by any other person with authorized access to the horse, or while the horse is being ridden, driven or exercised. The Person Responsible (PR) must be an EC Sport License holder in good standing OR in the case of a junior/Minor owner entries, a parent/guardian is entitled to sign as PR. In the case of USEF member entries PR may also be a USEF member in good standing (see Article A213.2)

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.

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, 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 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 attorney's 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, 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.

Owner** Must Be Adult	Print Name	Signature	Emergency Phone Number
Coach ** Mandatory Must be Adult EC/USEF#	Print Name	Signature	Emergency Phone Number
Rider 1 ** Mandatory Must be Adult	Print Name	Signature	Emergency Phone Number
Rider 2 Must be Adult	Print Name	Signature	Emergency Phone Number
Coach (if applicable) EC/USEF#	Print Name	Signature	Emergency Phone Number
Print Name of Minor	Print Name of Parent or Guardian	Signature of Parent or Guardian	Emergency Phone Number
Print Name of Minor	Print Name of Parent or Guardian	Signature of Parent or Guardian	Emergency Phone Number

MUST BE SIGNED IN AT LEAST 3 PLACES BY ADULTS ONLY
AHA/EC/USEF Membership is not required for Parents/Guardians signing for minors.
The Person Responsible (PR) MUST be an EC or USEF member in good standing.