



Stall Numbers:

Andalusian World Cup Entry Forms Sept 20-23, 2017

Due to sanctioning requirements, the Andalusian World Cup must provide separate entry forms based per division to be entered (ANCCE, Dressage & Sport Horse, World Cup and Working Equitation). Within these guidelines, we have made every effort to consolidate and ease the process. Each entry must have this cover form, as well as entry form or forms from division(s) the horse is competing in.

World Cup Champion & Supreme Champion:

These classes signify the "Best of the Best" from both the ANCCE and World Cup programs with Halter/Morphology competition to be ranked by all judges, national and international. Horses who have been awarded "Champion", from any show in the past 5 years, are automatically "qualified" in their respective classes, or qualify at the show by entering a standard class.

at the show by entering a standard class.	
OWNER:	PHONE:
EMERGENCY CONTACT:	EMAIL:
ADDRESS:	
RANCH NAME:	
TRAINER:	
TOTAL NUMBER OF HORSES:	
HORSE STALLS: TACK STALLS: STAI	LLS WITH MATS: TOTAL STALLS:
Please indicate quantity of horses competing in each # ANCCE: # WORLD CUP: # DRESSAGE/DSHB: # WORKING EQUITATION:	ı division:
Will be stabling with	Trainer/Ranch
**Stalls include 4 bales of shaving	gs. Additional shavings available on-site.
Make Checks Payable to: Andalusian	World and mail completed form & check to:
	sianWorld LLC
	errito Drive, #153 de, CA 92507
Riversi	Entry # of
Official Use:	

Have Questions?

ANCCE

AWC/Dressage/Working Equitation

Violet Paez (951) 230-1180 violetanddoc@gmail.com Kevin Kidder (951) 254-3327 kevin@andalusianworld.com

PAYMENT INFORMATION:

* All event photos will be available for FREE download

**Horses placing 1st & 2nd in their respective classes for halter, horses shown in a standard performance class at AWC and those with a previous "Championship" title, from ANY show in the past 5 years will qualify to compete in the AWC Championship and Supreme Championship Sweepstakes

Classes. Please see show rules for details.

Even if entry is paid in full, an open check or credit card must be given to the show secretary before exhibitor numbers will be issued.

Make checks payable to:

AndalusianWorld 5253 El Cerrito Drive #153 Riverside, CA 92507

ANCCE ENTRY FEES	
AWC ENTRY FEES TOTAL	
WORKING EQUITATION ENTRY FEES TOTAL	
DRESSAGE/SPORT HORSE ENTRY FEES TOTAL	
STALL FEES (X \$235)-includes first bedding	
STALL MATS (X \$40)	
OFFICE FEE (\$25 per horse)	
*PHOTOGRAPHY FEE (\$25 per horse)	
DRUG FEE (\$10 per horse)-Dressage, see entry form	
CLASS SPONSORSHIP	
**AWC CHAMPIONSHIP CLASS (\$150)	
**AWC SUP. CHAMPIONSHIP CLASS (\$250)	
USEF FEES (Dressage/Sport Horse Only -see entry form)	
Total:	

CREDIT CARD INFORMATION

NAME ON CREDIT CARD
CARD NUMBER
EXP. DATE
BILLING ZIP CODE
3 DIGIT SECURITY CODE

NOTE: 3% TRANSACTION FEE TO BE APPLIED TO CREDIT TRANSACTIONS

CARDHOLDER'S SIGNATURE

RELEASE, ASSUMPTION OF RISK, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

SIGNATURES REQUIRED AT EACH X BELOW. UNSIGNED ENTRIES WILL NOT BE ACCEPTED. CAREFULLY READ THIS AGREEMENT
BEFORE SIGNING AS YOU ARE WAIVING SIGNIFICANT LEGAL RIGHTS

WHEREAS, I understand and acknowledge that activities involving horses ("Equine Activities"), including but not limited to the mounting, riding, walking, dismounting, grooming, training, handling, feeding, and otherwise being in the physical proximity of horses is a dangerous activity which produces a foreseeable risk of mortal or serious personal injury and/or property loss to the participant in such activity as well as to the person or property of others; and WHEREAS, I understand and recognize and warrant that this Release, Waiver of Liability and Indemnity Agreement ("Release") is being voluntarily and intentionally signed and agreed to, and that in signing this Release I know and understand that this Release may further limit the liability of equine professionals to include any activity, whatsoever, involving horses, including death, personal injury and/or damage to property. WHEREAS, I recognize and agree that the equine professional(s) at AndalusianWorld LLC(AW) has/have made reasonable and prudent efforts to determine my ability to engage in the "Equine Activity", and has/have sufficient knowledge of my equine and horseback riding skills as for me to relieve, release and hold harmless said equine professional(s) from any continuing duty to monitor my Equine Activities.

NOW THEREFORE, in consideration of being granted access and/or use of the facilities Leased by AndalusianWorld LLC ("AW") and for other good and valuable consideration, receipt of which is hereby acknowledged, I agree as follows:

1. **Assumption of the Risk.** I hereby assume full responsibility for, and risk of, any death or bodily injury to myself or others (including, but not limited to, those matters set forth in the above recitals) and damage to or destruction of my property or the property of others, caused by my engaging in any Equine Activity either on the premises of AW or, unless such bodily injury or property damage is attributable in full or in part to the gross negligence of AW. My responsibility includes, but is not limited to, payment of (i) medical costs for myself and others that I may have injured, (ii) costs to replace my own property or the property of others that I may have lost, destroyed, or damaged, and (iii) damages for other non-medical and non-property items such as pain and suffering and lost wages, etc.

2. Release, Waiver of Liability, and Discharge of Claims.

- (a) I hereby release, waive, and discharge any and all claims that I may now or in the future have for damages against AW, including its owners, occupants, tenants, subtenants, licensees, employees, officers, directors, or agents and the respective affiliated entities or persons of any one or more of them, arising directly or indirectly from my death, the death of any other person, bodily injury to me or others, or damage to my property or that of others, attributable to my engaging in Equine Activities, or my presence on the facilities Leased by Andalusian World LLC.
- (b) I acknowledge that AW requires me to wear USET approved headgear with a chin strap while jumping and requires me to wear a safety helmet while riding. I understand and acknowledge that the risk of head injuries and death are significantly reduced by wearing appropriate headgear. I hereby release, waive, and discharge AW, including its owners, occupants, tenants, subtenants, licensees, employees, officers, directors, or agents and the respective affiliated entities or persons of any one or more of them, against any and all claims that I may now or in the future have for damages resulting from my failure to wear headgear while riding either on AW's premises or at an off site facility.
- (c) This release is intended to release, waive and discharge, in advance, AW, together with its owners, occupants, tenants, subtenants, employees, officers, directors and their respective affiliates or persons of any one or more of them, from and against any liability arising out of or connected in any way with my or my guests or invitees engaging in any Equine Activities on the AW premises or in any activity in which an AW representative is required to attend on my behalf, and/or my or my guests or invitees presence on the AW premises, even though such liability may be attributable, in full or in part, to the negligence, recklessness or misconduct of one or more of such persons or entities.
- (d) Medical Authority. I, (participant, or if minor, parents/guardians) hereby grant permission and authority to AW, its officers and authorized employees to act for me in executing verbal instructions or if unable to contact us, to act for us in dealing with physicians, available ambulance companies and hospitals, to obtain prompt medical attention for the person named above in the event of any perceived medical emergency. I hereby convenant and agree to release AW, its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persons of any one or more of them, and hold harmless from liability connected with obtaining prompt medical attention for the person named above.
- (e) In accordance with such release, waiver, and discharge, and in consideration of being allowed to utilize and/or visit the AW facilities, I promise not to sue or demand any money or anything else of value from AW, including any of its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persona of any one or more of them.
- (f) I understand that by entering the event premises, I consent to interview(s), photography, audio recording, video recording and

its/their release, publication, exhibition, or reproduction to be used for news, web casts, promotional purposes, telecasts, advertising, inclusion on websites, social media, or any other purpose by AW and its affiliates and representatives. Images, photos and/or videos may be used to promote similar AW events in the future, highlight the event and exhibit the capabilities of AW. You release AW, its officers and employees, and each and all persons involved from any liability connected with the taking, recording, digitizing, or publication and use of interviews, photographs, computer images, video and/or or sound recordings.

By entering the event premises, you waive all rights you may have to any claims for payment or royalties in connection with any use, exhibition, streaming, web casting, televising, or other publication of these materials, regardless of the purpose or sponsoring of such use, exhibiting, broadcasting, web casting, or other publication irrespective of whether a fee for admission or sponsorship is charged. You also waive any right to inspect or approve any photo, video, or audio recording taken by AW or the person or entity designated to do so by AW.

- **3. Indemnification.** I agree to completely indemnify and hold harmless AW, including any of its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persona of any one or more of them, from and against any and all claims, demands, causes of action, suits, actions, losses, liabilities, costs and/or expenses, including attorney's fees, which are occasioned by, or otherwise attributable to, matters for which I have assumed the risk and for which I am responsible in accordance with Section 1 hereof, and for any actions brought by my guests or invitees.
- **4. Binding Nature of Agreement.** I agree that this Agreement shall be binding on my personal representatives, heirs, and assigns.
- **5. Governing Law.** This Agreement shall be governed by, and construed in accordance with, the internal substantive laws of the State of California, without regard to the choice of law rules thereof. I hereby submit to the in personam jurisdiction of the State of California. Venue for purposes of any litigation or arbitration concerning this Agreement shall be in Los Angeles County, California.
- **6. Severability.** In the event that any provision of this Agreement shall be void or unenforceable for any reason, then such provision shall be stricken and of no force and effect. The remaining provisions of this Agreement, however, shall continue in full force and effect, and to the extent required, shall be modified to preserve their validity.

Executed this

Parent/Guardian's Signature

day of

Print Owner Name	Print Trainer Name	Print Rider/Handler Name
x Owner/Agent Signature	x Trainer/Agent Signature	x Rider/Handler/Agent Signature
Street:	Street:	_ Street:
		City/State:
•	Zip:	•
Tel:	-	<u> </u>
the foregoing Release, Waiver of Liability	signed is the parent or legal guardian of the mir and Indemnity Agreement, and in consideration inor to participate in Equine Activities, hereby	on of AW allowing the below named minor

Print Parent/Guardian Name

ANCCE

ANCCE ENTRY FORM

OWNER:		CODIG	O:	
RIDER/HANDLER:				
Name of Horse	Registration/Codigo	Date of Birth	Sex	
Sire	Dam		Color	
Rider/Handler	Class Numb	er(s)		Entry Fees
Rider/Handler	Class Numb	er(s)		Entry Fees
Name of Horse	Registration/Codigo	Date of Birth	Sex	
Sire	Dam		Color	
Rider/Handler	Class Numb	er(s)		Entry Fees
Rider/Handler	Class Numb	er(s)		Entry Fees
Name of Horse	Registration/Codigo	Date of Birth	Sex	
Sire	Dam		Color	
Rider/Handler	Class Numb	er(s)		Entry Fees
Rider/Handler	Class Numb	er(s)		Entry Fees
				· · · · · · · · · · · · · · · · · · ·



Questions/ Necesitas Ayuda?

Violet Paez (951) 230-1180 violetanddoc@gmail.com

* All event photos will be available for FREE download

**Horses placing 1st & 2nd in their respective classes, and those with previous "Championship" title, from ANY show in the past 5 years will be qualified to compete in the AWC Championship and Supreme

Championship Sweepstakes Classes.

ANCCE ENTRY FEES (X \$150)	
STALL FEES (X \$235)-includes first bedding	
STALL MATS (X \$40)	
OFFICE FEE (\$25 per horse)	
*PHOTOGRAPHY FEE (\$25 per horse)	
DRUG FEE (\$10 per horse)	
CLASS SPONSORSHIP	
**AWC CHAMPIONSHIP CLASS (\$150)	
**AWC SUP. CHAMPIONSHIP CLASS (\$250)	
Total:	

ANDALUSIAN WORLD CUP & WORKING EQUITATION

AWC & WORKING EQUITATION ENTRY FORM

OWNER:				
RIDER/HANDLER:		CONTAC	CT PHONE:	
Name of Horse	Registration	Date of Birth	Sex	
Sire	Dam			
Rider/Handler	Class Nun	nber(s)		Entry Fees
Rider/Handler	Class Nun	nber(s)		Entry Fees
Name of Horse	Registration	Date of Birth	Sex	
Sire	Dam	l		
Rider/Handler	Class Nun	nber(s)		Entry Fees
Rider/Handler	Class Nun	nber(s)		Entry Fees
Name of Horse	Registration	Date of Birth	Sex	
Sire	Dam			
Rider/Handler	Class Nun	nber(s)		Entry Fees
Rider/Handler	Class Nun	nber(s)		Entry Fees
	* ATATO CI	D C(11 1	ΦΕΟ C1 Φ	150 Com Clarino #250

*AWC Class Fees: Standard classes: \$50, Champ: \$150, Sup. Champ: \$250



Questions/ Necesitas Ayuda?

Kevin Kidder (951) 254-3327 kevin@andalusianworld.com

* All event photos will be available for FREE download

**Horses placing 1st & 2nd in their respective classes, and those with previous "Championship" title, from ANY show in the past 5 years will be qualified to compete in the AWC Championship and Supreme Championship Sweepstakes Classes.

AWC ENTRY FEES TOTAL	
WORKING EQUITATION FEES (\$135/PHASE)	
STALL FEES (X \$235)-includes first bedding	
STALL MATS (X \$40)	
OFFICE FEE (\$25 per horse)	
*PHOTOGRAPHY FEE (\$25 per horse)	
DRUG FEE (\$10 per horse)	
SPONSORSHIP AWC STANDARD CLASS(\$50)	
SPONSORSHIP AWC CHAMPIONSHIP CLASS (\$250)	
SPONSORSHIP AWC SUP. CHAMPIONSHIP CLASS (\$500)	
TOTAL:	

DRESSAGE & & DSHB

20	1	7
	-	-

COMPETITION NAME_____COMPETITION DATES

Official	Use Only
BRID	LE#

	Name of Horse			Previo	Previous Name (IFANY)			JSEF#	USDF#		For Sale		
BREED	Sex	Неіднт	Color	Coggins I	DATE (ENCL	OSED COF	PY)	Sir	RE	D	АМ		
Dam's	SIRE	Country	of Birth	YEAR OF B	BIRTH	Brei	EDER		FEI/PASSPORT	#	Groot	VI	
DIDED/UAA	IDI EB						CLASS No.	Division	CLASS DESC	PIDTION	QUAL Y/N	FEES	
RIDER/HAN							OLASS NO.	DIVISION	OLASS DESC	KIF HON	QUAL 1/N	I EES	
Address													
CITY/ST/ZIP_													
CELL PHONE													
EMAIL ADDRE												-	
RIDER CITIZE													
Rider Statu													
OWNER													
USEF#													
Address									FEES AND QUALI				
CITY/ST/ZIP									SS FEES \$30 PE				
CELL PHONE									BER FEE \$25 PER				
EMAILADDRE	SS						USEF H		OR BRIDLE #FEE	Ψ23			
OWNER CITIZ	ENSHIP (IF N	ют USA)					\$8 USE	F FEE + \$8	3 DRUG FEE = \$16.00)			
TRAINER_							CDI Hor \$8 USE		20 Drug Fee = \$28	.00			
USEF#		_USDF#		LOCAL#			IHP Disc	IPLINE F	ee (\$35 if requ	IRED)			
Address							STABLING	FEES	STALL @ \$	235 /STALL			
CITY/ST/ZIP_							Tack Sta	LLS _	STALL @ \$_	/Stall			
CELL PHONE							BEDDING	_	Bales @ \$_	/Bale			
EMAILADDRE	ss						Non Con	MPETING	HORSE FEE \$]	110			
COACH							GAIG Qu	JALIFYING	FEE (\$15/CLAS	s)			
USEF#		_USDF#		LOCAL#_			GROUNDS	s Fee or	OTHER FEES	_			
Address							RECORDIN	g Fee	\$35	-			
CITY/ST/ZIP							LATE/CHA	ange/Bai	NK CHARGES FOR	CC			
Please Fill O	ut Both Sid	des of This	Form. Re	everse side l	MUST be S	IGNED.		Т	OTAL FEES				
Stabling I	nformat	ion & Sp	ecial R	equests:	Please list or	nly ONE nam	ne (either indi	ividual or b	parn) for entire group	(so we can get e	veryone to	gether)	
Group/Self						Т	ue V	Ned	Thu Fri	Sat	Sun	Mon	

Group/Self	Tue	Wed	Thu	Fri	Sat	Sun	Mon
Stalls							
Tack Stalls							

I hereby agree to release, indemnify and hold harmless USDF, its instructors, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with, participation in this competition or related activities. I also hereby agree to release, indemnify and hold harmless the competition liscensee, show management, competition staff, show committee and members, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with, participation in this competition or related activities.

Federation Entry Agreement Effective

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulter or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of the Competition. I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the Competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign 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. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

Federation Release, Assumption of Risk, Waiver, and Indemnification

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

I AGREE in consideration for my participation in this Competition to the following:

I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that 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 AGREE to hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results resulted, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while 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 to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am 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 represent that I have the requisite training, coaching and abilities to safely compete in this competition.

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 reportform.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and all terms and provisions of this 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. Copied from USEF website 11/14/2013

Owner's/Agent's Signature (Mandatory)	Rider/Handler Signature (Mandatory)	Trainer's Signatur (Mandatory)	E COACH'S SIGNATURE (IF APPLICABLE)
PRINT NAME	PRINT NAME	PRINT NAME	PRINT NAME
D10	(D)		D D / O N
PARENT/GUARDIAN SIGNATURE IF R	IIDER/DRIVER/ RAINER/HANDLER/VAI	JLTER/LONGEUR IS UNDER 18	Print Parent/Guardian Name
RIDER EMERGENCY CONTACT INFOR	MATION		
Name of Contact/Relationship:			PHONE:
FILL OUT ONLY IF THE COMPETITION YOU ENTER ON THIS ENTRY FORM OFFERS CERTAIN USE OF CHARGE CARDS!! (Check in the prize list or individual competition requirements)			
UISA A	MEX CARD NO	<u>-</u>	EXP DATE
MasterCard C	otherNAME ON CARD:		CVV #
BILLING ADDRESS			ZIP CODE