



**SOUTHERN ARIZONA ARABIAN HORSE ASSOCIATION
All-Breed Circuit Shows 2017**

HORSE #

Please indicate ONE division for high point			
Walk/Trot – 18 & Under		13 & Under	
Walk/Trot – 19 & Over		14 thru 18	
Adult Amateur		PRO	

DATE:

Horse's name:

**SIGNATURES
REQUIRED ON
BACK**

Breed:

Horse's Age:

****ADDRESSES AND EMAILS MUST BE COMPLETED FOR ALL OWNERS AND RIDERS****

Owner's Name:			
Owner's Address:	City:	State:	Zip:
Owner's Email:	Phone:		

Rider's Name:			
Rider's Address:	City:	State:	Zip:
Rider's Email:	Phone:		

CLASS #	Rider/ Handler	Rider's Age	Class fee

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- SAAHA Member- \$9.00
- 4-H Member- \$9.00
- NON-Member- \$10.00

FOR OFFICIAL USE ONLY		Total Class Fees
Check #	Amount: \$	Stall Numbers:
		Stall Fee (includes 1 bag of shavings)
		Number of bags: Additional shavings(10.00 per bag)
		Office Fee
Please make check payable to SAAHA		Total Fees

SAAHA ALL-BREED CIRCUIT SHOW RULES

- The Show Committee and/or judge on hand reserves the right to excuse any exhibitor and/or horse showing unsafe behavior, lameness, unsportsmanlike conduct toward other horses, exhibitors or show staff.
- As closely as possible, USEF rules will be in effect; a rulebook is kept in the office.
- Martingales will be allowed in all classes.
- Draw reins are allowed only in novice horse classes.
- Tie-downs, mechanical hackamores, or any other illegal equipment is **NOT** allowed in any class. If you are unsure about your equipment, please consult the show office.
- Stallions may be shown.
- Definitions:
 - **WALK/TROT** – Riders may not enter into lope/canter/gallop classes
 - **NOVICE HORSE** – Has not won more than 3 blue ribbons in that performance division
 - **NOVICE RIDER** – Has not won more than 3 blue ribbons in that performance division
 - **AGE DIVISIONS** – Based on age as of January 1
- **Hats and boots are required.** Proper show attire is recommended.
- **Helmets are required in leadline classes, but may be worn in any class.**
- **Leadline** riders must have their feet in stirrups. Additionally, the lead may **NOT** be attached to the bit.
- **Classes may be combined, split or canceled.**
- Riders with open checks can add classes at the gate. All other entries must be made at least 2 classes in advance at the show office.
- **All entries taken on the show grounds. Open checks preferred.**
- Office opens one hour before the show begins.
- Scratched classes must be taken at the show office; Refunds given at the discretion of show management.
- No alcoholic beverages on show premises.
- All exhibitors must be off show grounds ½ hour after completion of show.

WAIVER OF LIABILITY

I hereby certify that every horse and rider is eligible as entered. I make these entries at my own risk and subject to all rules and regulations of the show I agree for myself and my representatives to be bound thereby. In consideration of being allowed to enter said horse(s), I agree to assume all risks connected with the show. I further agree that if any injury may occur to me, or damage occur from any cause, to the horse(s) exhibited, or to any equipment, I will make no claim therefore. I further agree to fully indemnify and hold harmless Southern Arizona Arabian Horse Association (an Arizona non-profit corporation). The show, the facilities leased by “the show” and the state wherein held, their officials and management, against any and all liability in case of personal injury or property damage arising from an accident occasioned by me or any employee, agent or animal of mine.

REQUIRED SIGNATURES – COMPLETE ALL LINES!

Each person signing this entry form acknowledges that he/she has read both sides of this entry form and agrees to the applicable terms, conditions, waiver and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge.

Signature of Owner: _____ Date: _____

Signature of Trainer: _____ Date: _____

(Must be signed by an adult)

Signature of Adult Riders/Drivers/Handlers: _____ Date: _____

Name of Junior: _____ Birthdate: _____ Age: _____

Name of Junior: _____ Birthdate: _____ Age: _____

Signature of Parent
or Guardian: _____ Date: _____