OWNER	Wine Country Classic								TRAINER/COACH									
Name	August 18-21, 2022							Nan	Name									
Address	Brookside Equestrian Park, Elk Grove, CA							Bar	Barn Name									
City/State/Zip	Entries must be postmarked by August 5, 2022 All exhibitors must have their current membership cards with them or a copy thereof, or send a copy of								Address									
Phone () USEF/USHJA #	their card with their entry. OFFICE MUST SEE PONY or HORSE MEASUREMENT CARDS. Back of entry must be signed by owner, rider and trainer. No Entry Number will be given out with incomplete signatures							City	City/State/Zip									
Email PCHA	Make checks payable to: Wine Country Classic Horse Show and mail with entries to: Brookside, Wine Country Classic, 11120 Bradley Ranch Rd., Elk Grove, CA 95624							Pho	Phone () USEF/USHJA #									
SS# or FED ID#	Questions? Call Megan Quinn at (949) 510-6395 or Email mquinn1600@gmail.com Please note: No fax or email entries accepted							Ema	Email PC				Norcal					
PRIZE MONEY PAYEE (if different than Ow	RIDER ONE (1) INFORMATION								RIDER TWO (2) INFORMATION									
Payable To	Name							Nar	Name									
Address	Address							Add	Address									
City/State/Zip	City/State/Zip						City	City/State/Zip										
SS# or FED ID#		USEF/USHJA #			US Citizen? (Circle one): YES NO				0 USE	USEF/USHJA#				US Citizen? (Circle one): YES				
Arrival Date: Stable With:	Amateur - Birthdate			Junior - Birthdate				Ama	teur - Birt	hdate		Junior - Birthdate						
		NorCal			PCHA				Nor	NorCal				PCHA				
NAME OF HORSE	HOR	SE USEF # and TYPE RIDER CLASS NUMBERS ENTER								ENTERE	D							
		☐ Rec # ☐ ID #	1															
Color Age Sex Height Circle Green Status 1st Yr 2nd Yr	Circle Junior Hunter or Po	ony Size Measurement	2															
1st Yr 2nd Yr Small Medium Large USEF ENTRY AGREEMENT																		
representatives, employees and agents, I agree that I am subject to Equestrian Park (Competition). I agree to be bound by the Bylaws and agree to release and hold harmless the competition, the Feder and every horse I am entering is eligible as entered. I also agree the cable - casts, broadcasts, internet, film, new media or other likenes. Those likenesses shall not be used to advertise a product and they use, including any claim to compensation, invasion of privacy, right instituted against the Federation must be filed in New York State. S Federation Release, Assumption of Risk, Waiver, and Indemniff I AGREE in consideration for my participation in this Competition to I AGREE that the "Federation" and "Competition" as used herein in Federation affiliates. I AGREE that 1 choose to participate voluntarily in the Competition aware and acknowledge that horse sports and the Competition in I AGREE to hold harmless and release the Federation and the Competition of I AGREE to expressly assume all risks of Harm to me or my horse, I AGREE to indemnify (that is, to pay any losses, damages, or cost others for any Harm caused by me or my horse while at the Competion exhibitor, I consent to the child's participation and AGREE to coaching and abilities to safely compete in this competition.	driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of sks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, remoney damages or otherwise for any harm to me or my horse and for any Harm of any nature leration or the Competition. To mother than the Federation or the Competition. To and the Competition and to hold them harmless with respect to claims for Harm to me or reaction Rules about protective equipment, including GR801 and, if applicable, EV114, and I unages me to do so while WARNING that no protective equipment can guard against all injuries. and AGREE to assume all of theobligations of this Release on the child's behalf I represent that any provide information on my injury and treatment to the Federation on the official USEF accidence.						ountry Cla question ar r and/or p gn photog petition, sp any rights e State of s, personr of a junio pain, suff ure caused my horse, nderstand . If I am a at I have i	intry Classic & Brookside estion arising under the Rules, and/or participate under the Rules, photographs, videos, audios, lition, sport, or the Federation. The state of New York, and any action with such State of New York, and any action personnel, volunteers and f a junior exhibitor. I am fully ain, suffering, or death. ("Harm"). The caused by me or my horse to be caused by me or my horse to the sum of				DEPOSIT AMOUNTS DUE WITH THIS Schooling/Reservation Fee \$50 x = \$ #Horse Stalls \$275 x = \$ Tack Stalls \$275 x = \$ Late Fee \$25 x = \$ Haul In Fee \$50/day x = \$						
electronically, I acknowledge that my electronic signature shall have									Agreement									
OWNER (Mandatory) Signature:	Signature:	Signature:							MAREN	L			OTAL AMOU	NT ENCL	OSED		\$	
Print Name:	Print Name:		Print Name:							-	FEES							
TRAINER/COACH (Mandatory)							RENT/GII/	NT/GUARDIAN (if Rider 2 is a minor)					SEF Horse/Drug				\$3	
Signature:	Signature:	Signature:										SHJA Fee SEF Show Pas	\$2 3 \$45			\$3 \$14		
Print Name:					<u> </u>								SHJA Show Pa			-	•	
THIL WAITE.	Print Name: Print Name:																	