



2023 Michigan All Morgan Horse Show
MSU Pavilion
May 26-28, 2023

ENTRIES DUE May 4, 2023

Mail entries to: Rebecca Rett
300 Ives Road
Mason, MI 48854

One Owner per Entry Blank
 Indicate Rider Number in () for each class.

Leave Blank	Horse				Class# ()	Class# ()	Class# ()	Class# ()	Class# ()
	Color	Age	Sex	Reg. #	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	USDF #				Rider # 1:				
	USEF Perm. Recording No. (if applicable)				Rider # 2:				
Leave Blank	Horse				Class# ()	Class# ()	Class# ()	Class# ()	Class# ()
	Color	Age	Sex	Reg. #	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	USDF #				Rider # 1:				
	USEF Perm. Recording No. (if applicable)				Rider # 2:				
Leave Blank	Horse				Class# ()	Class# ()	Class# ()	Class# ()	Class# ()
	Color	Age	Sex	Reg. #	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:	Entry Fee:
	USDF #				Rider # 1:				
	USEF Perm. Recording No. (if applicable)				Rider # 2:				

OWNER Information

Print Name: _____
 Address _____
 City: _____
 State _____ Zip: _____
 Phone: _____
 AMHA. # _____
 USDF # _____

RIDER Information #1

Print Name: _____
 Address _____
 City: _____
 State _____ Zip _____
 Phone: _____
 AMHA. # _____
 USDF # _____
 Date of Birth (Eq Rider) _____

TRAINER Information

Print Name: _____
 Address _____
 City: _____
 State: _____ Zip _____
 Phone: _____
 AMHA # _____
 USDF # _____

RIDER Information #2

Print Name: _____
 Address _____
 City: _____
 State _____ Zip _____
 Phone: _____
 AMHA. # _____
 USDF# _____
 Date of Birth (Eq Rider) _____

All Entries must be complete to have back number issued. To be complete each entry must include: a copy of each horse's registration paper, purchase contract (if applicable). Current AMHA card for the Trainer, Owner and Rider.

Total Entry Fees from Above	\$ _____
Office fees @\$30 per horse	\$ _____
Late Entry Fees @\$35 per horse	\$ _____
Stalls @ \$100 each	\$ _____
Advertising/Sponsorship Payment	\$ _____
Camping @ \$100.00 per show	\$ _____
Camping after Deadline 5/4/23 @ \$150.00	\$ _____
Credit Card Convenience fee 5%	\$ _____
Bench Seating @ \$125/bench or \$275 for 3	\$ _____
Total Fees	\$ _____
_____ Check payable to MJMHA or _____ Visa _____ MC	
Card Holder _____	
Acct# _____	
Expiration Date _____ 3 digit code _____	
Signature _____	
Print name _____	
Address _____	
City _____ State _____ Zip _____	

MICHIGAN JUSTIN MORGAN HORSE ASSOCIATION, INC., 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 “**MICHIGAN JUSTIN MORGAN HORSE ASSOCIATION, INC., also known as MJMHA**” and “**Competition also known as Michigan All Morgan Horse Show**” as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longe-liner, lessee, owner, agent, coach, trainer, or as parent or guardian bodily injury including broken bones, head injuries, trauma, pain, suffering, or death (“Harm”).

I AGREE to hold harmless and release the Michigan Justin Morgan Horse Association 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, directly or indirectly, from the negligence of the Michigan Justin Morgan Horse Association, Inc., 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 Michigan Justin Morgan Horse Association, Inc., or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Justin Morgan Horse Association, Inc., 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 am aware of protective equipment and I understand that I am entitled and it is recommended to wear protective equipment without penalty, and I acknowledge that the Michigan Justin Morgan Horse Association, Inc. 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 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 Michigan Justin Morgan Horse Association, Inc., in writing as a report.

BY SIGNING BELOW, I AGREE to be bound by all applicable 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.

**Rider/Driver/Handler/Vaulter/Longe-liner (mandatory)
COACH**

OWNER/AGENT

TRAINER

Signature: _____ (mandatory) Signature: _____ (mandatory) Signature: _____ (mandatory)

Print Name: _____ Print Name: _____ Print Name: _____

Parent/Guardian Signature (required if Rider/Driver/Handler/Vaulter/Longe-liner is a minor): _____ Print Parent/Guardian Name: _____

EMERGENCY CONTACT PHONE NO. _____

Is Rider/Driver/Vaulter a U.S. Citizen: _____ Yes _____ No

e back of this form must also be completed with signatures for entry to be complete!