NO: _____ NO:_____ NO: _____

HITCH NAME _____

OWNER'S NAME _____

ADDRESS _____

CITY _____ STATE/ZIP _____

PHONE ( ) _____ CELL PHONE ( ) _____

SOCIAL SECURITY #_____ E-MAIL _____

BREED _____ ARRIVAL DATE:_____TIME:_____

CLASS	DRIVER	ENTRY FEE PER CLASS

HOW MANY		TOTAL ENTRY FEES
	BOX STALLS @ $40 per Stall	
	CAMPER FEE @ $175 (Tues. 9/22 thru Sun. 9/27/09)	
	EXHIBITOR BADGES @ $10 per Badge when ordered on entry blank with entries. Badges purchased after 9/1/09 will be $20. (Each exhibitor **MUST** have a badge or full gate admission will be charged. Badges will be good for the entire show with unlimited access to and from the Coliseum and stabling area.)	
	BOX SEATS 4 seats @ $100 6 seats @ $150 8 seats @ $200	
	CLASS SPONSORSHIP: REGULAR CLASS $100 FOUR OR SIX-HORSE HITCH CLASS $250	
	EASTERN STATES EXPOSITION FOUNDATION TAX DEDUCTIBLE DONATION	
	OFFICE FEE	**$10**
	TOTAL FEES DUE	
	AMOUNT ENCLOSED	

EASTERN STATES EXPOSITION
DRAFT HORSE SHOW

1305 MEMORIAL AVENUE, WEST SPRINGFIELD, MA 01089
Phone: 413-205-5016 Fax: 413-787-0127 (Fax after 9/12/09: 413-205-5108)
www.thebige.com/horseshow

To order feed & bedding, call 413-205-5307
or online at www.thebige.com/agriculture

September 24 - 27, 2009

Equestrian 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 I choose to participate voluntarily in the Competition with my horse/horses, as a driver, handler, lessee, owner, agent, 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 release Eastern States Exposition from all claims for money damages or otherwise for any Harm to me or my horse/horses and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of Eastern States Exposition.
I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) Eastern States Exposition 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 at the Competition.
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 AGREE that Eastern States Exposition as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

BY SIGNING BELOW, I further AGREE to be bound by all applicable Rules and all terms and provisions of this entry blank.

Owner/Driver/Handler (mandatory - complete and circle one)

Signature: _____

Print Name: _____

Street: _____

City/State: _____ **Zip:** _____

Parent/Guardian Signature (Required if /driver/handler is a minor):

_____

Print Parent/Guardian Name: _____

PAYMENT IN FULL MUST ACCOMPANY THIS FORM NO REFUNDS!!

Entries Close
August 15, 2009

Visa ____ MasterCard ____ Discover ____

Card # _____ **Exp. Date** _____

Signature: _____