

Phone:

Trainer:

Owner:

Trainer:

MEMBERSHIP & HORSE/PONY RECORDING HARFORD HORSE SHOWS ASSOCIATION

Annual Membership begins on the date of receipt of paid application and signed Waiver Release. No points will be credited to riders or horses for Year End Awards until registered as a member of HHSA. HHSA rules state, "To qualify for High Score Awards in Hunter or Pleasure Divisions, the animal must be registered with the Association. To qualify for High Score Awards in the Equitation Divisions, the rider must be a member of

the Association. Leadline, Mini, Short Stirrup and Long Stirrup Equitation Divisions do not need to register the animal." "All animals, in order to compete in any HHSA Medal Finals, must be registered with HHSA by June 1 and have shown in at least one (1) HHSA pointed division prior to the year end medal finals in the same year. If the animal is registered after June 1, a $$20^{10}$ late fee will be charged on top of the set horse membership fee." The responsibility of such recording shall rest entirely with the exhibitor. INDIVIDUAL MEMBERSHIP PLEASE SELECT THE TYPE OF MEMBERSHIP: Senior -\$40 Senior Amateur - \$40 Junior - \$40 Non-Riding - \$25 Non-Riding members of any age who do not ride Senior members are riding Senior Amateur members are Junior members are riding members over 18 years of age riding members over 18 years members who have not yet of age as of 12/1 of the previous as of 12/1 of the previous year. reached their 18th birthday for points toward Year as of 12/1 of the previous year. year and comply with the USEF Rule GR1306. Senior Amateur Senior members have full End Awards, but wish to Junior members have voting be a part of HHSA. You voting privileges. members have full voting privileges restricted only to the must be at least 18 years of age to have full voting privileges. nomination and voting of Junior Board members for one-year terms. privileaes. Name of Member: Junior Age as of 12/1 of Previous Year: ______ Date of Birth: _____ Primary Address: Cell Phone: E-mail (If member is a Junior, Parent or Guardian E-mail): Trainer E-mail: HORSE/PONY RECORDING Horse/Pony SHOW Name: Small Pony Medium Pony Large Pony Horse Measurement Card #: Measurement Card Issuer: A copy of pony measurement card must be submitted with application. If pony does not have a certified measurement card issued by the USEF, MHSA, VHSA, BCHSA, or HHSA, a measurement application must be submitted and the pony measured before it can earn year end points. Color:_____ Age: ____ Gender: Mare Gelding Primary Rider: _____ Trainer E-mail: Eligible Arabian? Yes No Eligible Thoroughbred? Yes No If horse or pony is eligible Arabian or Thoroughbred, credible documentation must be included with application. (i.e. pedigree, registration papers,

Jockey Club registration print out or papers, etc.) MEMBERSHIP FEES Senior/Sr. Amateur \$40.00 ___ Junior \$40.00 __ Non-Riding\$25.00 _ Horse/Pony Recording \$25.00 _____ Additional \$20 fee for any application received after June 1st \$20.00

TOTAL AMOUNT DUE

AMATEUR RULE

If registering as a Senior Member:

PROFESSIONAL

AMATEUR

I have read and comply to the USEF Rule GR1306 outlining Amateur certification.

Questions? 410-459-7470 or karen.cannon@hhsamd.org. Checks are to be made payable to HHSA. Please return completed application, signed waiver, any other respective paperwork (i.e. copy of measurement card, pedigree, etc.), and fees to:

> HHSA Membership c/o Karen Cannon 1906 Furnace Road, Jarrettsville, Maryland 21084

HHSA USE ONLY		
Date Received:	Total Payment:	Check # or Cash:



RELEASE, INDEMNIFICATION, WAIVER, & ASSUMPTION OF RISK

$\begin{array}{c} {\sf HARFORD\ HORSE\ SHOWS\ ASSOCIATION}\\ 2018\ {\sf SHOW\ SEASON} \end{array}$

n consideration for the participation of the undersigned ("Participant") in any or all the HHSA sponsored equestrial
events and/or shows ("Events') during the 2018 Show Year, I hereby agree to the following:

Printed Name/Relation to Applicant (i.e. Parent, Guardian, Self, Owner)							
Signature of Participant, Volunteer, and/or Member and Owner (Parent or Guardian if under the age of 18)	Date						
9) This Release shall be construed under and interpreted in a	accordance with the laws of the State of Maryland.						
8) If I am a parent or guardian of a minor participant, I conser the obligations of this Release and to assume all of the ob	ligations of a participant on the minor's behalf.						
7) I acknowledge that I am required to wear approved protections strongly urges me do so while warning that such equipment							
6) I have read the HHSA Rules and will abide by such.							
5) I agree to indemnify HHSA and the Venue and to hold the to me or my horse/pony and from any claims or causes of or my horse/pony.							
4) I hereby release and hold harmless HHSA and the Venue including, but not limited to, their respective offic officials, directors, employees, agents, volunteers, affiliated organizations, successors and assigns from any and all claims, actions, law suits, damages and causes of action arising from or associated with HHSA and any Events.							
3) I expressly assume all Risks to me and/or my horse/pony resulting from the negligence of HHSA and the venue for any Event including, but not limited to, Heavenly Waters Equestrian Center, Paddock Place Equestrian Center, Garrison Forest School, St. James Academy, Tranquility Manor Farm, Elkridge Harford Hunt Pony Club, Caves Farm, Claddagh Manor Farm, St. John's Church, Country Hill Farm, Molly Hill Farm and Goucher College ("Venue" or "Venues").							
2) I understand that equestrian sports and Events are dangerous and involve inherent risks the Participant and their horse/pony including, but not limited to, injury, accident, loss, bodily injury, trauma, pain, suffering and/or death ("Risks"). I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH KNOWLEDGE OF TH DANGER INVOLVED. I HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF DAMAGES, INJURY OR DEATH, AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE: (Participant, Parent or Guardian's initials)							
1) I (Participant, Parent or Guardian's Name on behalf of Part choose to voluntarily participate in any Events of HHSA wi rider, trainer, driver, owner, lessee, owner, coach, driver, ha guardian of minor Participant.	icipant) :h my horse/pony. My participation will be as a						
events and/or shows ("Events') during the 2018 Show Year, I here	eby agree to the following:						

Emergency Contact Phone

REQUIRED Emergency Contact to be reached at a show in the event of injury



YEAR END AWARD PRIZE QUESTIONNAIRE

Rider Name:							
Horse/Pony Show Name:							
HORSE/PONY INFO							
Preferred Blanket Size (please circle one)			5 78 80 8 <u>3</u>	2 8/1 O+l	ner		
Preferred Saddle Pad Size (please circle one)					iei		
·	Pony Regular/AP X-Large Pony Cob Horse Oversize						
Preferred Bridle Size (please circle one)	Pony	Cob		Oversize			
Preferred Halter Size (please circle one)	Pony	Cob	Horse	Oversize			
RIDER INFO							
Preferred Jacket Size (please circle one)	YOUTH ADULT	Small Small	Medium Medium	Large Large	X-Large X-Large		
Preferred Shirt Size (please circle one)	YOUTH ADULT	Small Small	Medium Medium	Large Large	X-Large X-Large		
Preferred Sweatshirt Size (please circle one)	YOUTH ADULT	Small Small	Medium Medium	Large Large	X-Large X-Large		
Preferred Shoe Size (please circle one)	YOUTH 6 7 8 9 10 Other ADULT 6 7 8 9 10 Other						
Preferred Belt Size (please circle one)	22 24 26	28 30 32	2 34 36 38	8 Other_			
Р	RIZE IDEAS						
What do YOU want to see as a prize for year end av	vards?						