



NC State 4-H Horse Show General Entry Form
JB Hunt, Jr. Horse Complex, State Fairgrounds, Raleigh, NC
July 6-10, 2022

Entry #

(office use only)

JR
 SR
 Rookie W/T
 Little Britches
 Short Stirrup
 Long Stirrup
 Adaptive
 Cloverbud

Exhibitor's Name: _____ **Horse's Name:** _____
(The horse's name must match on the Coggins Test and Eligibility Card)

Division (s): Cloverbud **County:** _____
(Hunter Horse, Little Britches, Speed Events, etc.) (Where you are enrolled as a 4-H horse program member for the current year)

Address: _____ **Phone No:** () _____
(Street, town, zip)

Email Address: _____ **Age:** _____ **Birthdate:** _____
(Please print clearly) (as of 1/1/22)

Pony Height: _____ **Separate Dressage Entry Submitted:** Yes No
(Only record if you have a permanent card attached) (Enter Dressage Classes on the separate, Dressage entry form)

I certify that the individual and horse listed above have met all of the requirements necessary to participate in the NC State 4-H Horse Show.

Lou L. Astrand

(Signature: Qualifying Horse Show Secretary or Chairperson)

Please circle all the classes you wish to enter. Consult the NC 4-H Horse Program Rules and Regulations Manual and the footnotes on the class list to be sure you are entering the correct classes. Please note: Classes 46-51, 120-122, and 148-153 are Dressage Division Classes- See Dressage Entry Form

Junior Speed Events 2 4 6 8 10	Senior Speed Events 3 5 7 9 11	Stock Type Hunter 31 34 35 36	Rookie Hunter Walk/Trot 84 91 92 93	
Junior Hunter Horse 27 43 or 79 44 or 80 78 97 98 99	Senior Hunter Horse 29 43 or 79 44 or 80 81 94 95 96	Long Stirrup 25 40 41 42 88 89 90	Short Stirrup 22 37 38 39 85 86 87	
Junior Hunter Pony 26 72 73 74 103 104 105	Senior Hunter Pony 28 75 76 77 100 101 102	Little Britches 57 60 64 66 67	Western Pony 55 63 71 127 134 130* or 131* 132 or 133	
Junior Western Horse 56 65 70 128 130* or 131* 132 134	Senior Western Horse 54 59 69 129 130* or 131* 133 134	Junior Ranch 124 126 141 143 145 147	Senior Ranch 123 125 140 142 144 146	
Junior Non Trotting 108 110 or 112 113 115 or 116 or 117 118	Senior Non Trotting 109 111 or 112 114 115 or 116 or 117 119	Adaptive (No entry fee) 12 13 14 15 16 17 18 19 20 21	Versatility (\$24 entry fee) 83 (SR) 139 (JR)	Medal Class (must qualify to enter) 45(H) 135 (W/R)
Cloverbud (No entry fee. Enter Dressage on Dressage Form) 1 30 32 33 58 61 62 68 136	In Hand or Halter/Pleasure Pairs/Costume 23 24 52 53 82 106 107 137 138			

IMPORTANT: PLEASE BE SURE TO READ AND SIGN THE BACK OF THIS FORM! All entries must be accompanied with the following items to be accepted by show management. If any item is missing, the entry will be returned to sender.

- Copy of current 12 month negative Coggins Test for Equine Infectious Anemia (current through last day of show) (Horse's name must match that on entry form).
- Copy (not original) of 2022 NC 4-H Horse Program Eligibility Card with all completed signatures.

Note: The horse's name must be the same on all components of the entry including Entry Form, Eligibility Card and Coggins Test.

COMPLETED ENTRY FORMS AND FEES MUST REACH THE EXTENSION HORSE HUSBANDRY OFFICE **POST-MARKED NO LATER THAN 10 days after your qualifying show.**

Mail entries to: Extension Horse Husbandry, State 4-H Horse Show, NCSU, Box 7621, Raleigh, NC 27695. Office phone: (919) 515-5784

Full service camper hook ups are available on a first come basis. Fees are collected by Fairgrounds personnel on a nightly basis (\$30.00/night). Reservations not accepted.

CLASS ENTRY FEES	# of classes entered _____ x \$12.00 Cloverbud classes-no entry fee Versatility class (#83 or #139) \$24.00 Adaptive classes-no entry fee	\$
DRUG/SHOW ADMINISTRATIVE FEES	\$6.00 per horse (If shown by more than 1 exhibitor only has to be paid once.)	\$
STALL FEES	# of stalls _____ x \$65.00 (Horse & Tack Stalls)	\$
NON STABLING FEE	# of days _____ x \$5.00 Trailing/Grounds fee (if not getting a stall)	\$
SHAVINGS FEES	# of bags _____ x \$7.50 (Shavings are not included with the stall fee. Additional shavings can be purchased on the grounds.)	\$
SUBTOTAL OF SHOW FEES	Add all fees above	\$
SPONSORSHIP CREDIT	Total of sponsorships collected \$ _____ X 20%= \$ _____ off show fees <small>Please include sponsorships and payments with your entry form. For online payments, provided a copy of the email confirmation.</small>	\$-
TOTAL SHOW FEES	SUBTOTAL – 20% of SPONSORSHIPS COLLECTED. For entries, make checks payable to NCSU (Please be sure to read and sign page 2 of this form!) Please do not staple checks to forms.	\$

NOTICES and WAIVERS:

WARNING

Under North Carolina law, an equine activity sponsor or equine professional is not liable for an injury or death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina General Statutes.

LIABILITY WAIVER, ASSUMPTION OF THE RISK, PHOTO RELEASE AND INDEMNIFICATION AGREEMENT

In consideration for being allowed by NC State to participate, which includes but is not limited to being an active participant or spectator, in the 4-H Horse Show Program (hereinafter "Program") the undersigned custodial parent/guardian agrees as follows:

I do hereby affirm and acknowledge that me and/or my child are participating in the Program for my and/or his/her own personal benefit, and that I am, and my child has been, fully informed of the inherent hazards and risk to me and them associated with this activity including property damage, health risks, falls, and other personal injuries, up to and including death. I accept and assume responsibility for all risks, known and unknown, involved to me and/or my child and my and/or their property in the aforementioned activity, and I voluntarily authorize my and/or my child's participation in reliance upon my own judgment and knowledge of my and/or child's experience and capabilities.

I understand that the determination of my child's ability to participate in the Program should be made by my child's physician if necessary, including being found by such physician to be in good health and fully able to perform all activities associated with the Program. I understand that I need the approval of a physician if I am uncertain as to his/her physical fitness for the rigors of this Program. I understand that I may be required to seek approval from a physician if there is a health or safety question relative to my child's condition before being allowed to participate in the Program. In addition, I give permission to any doctor, hospital, or other medical facility to release confidentially to the treating physician(s) for my child any information they may have concerning my medical condition(s) and their professional contact with him/her for treatment purposes. I hereby grant my permission for such diagnostic, therapeutic, and operative procedures as deemed necessary for my child's benefit. A photocopy of this permission is to be considered valid as the original. I further understand that treatment for any medical problems my child may suffer is my responsibility and will be paid by me and/or covered by my insurance.

I shall indemnify and hold harmless NC State, its trustees, officers, employees and agents from any liability, losses, costs, damages, claims or causes of action of any kind or nature whatsoever, and expenses, including attorneys' fees, arising from or proximately caused by my child's participation in this Program. I further agree to accept and assume for myself, my assigns, executors, and heirs any and all such risks and losses that may occur.

I do hereby agree to allow my child to be photographed, audio or videotaped by the Program. I further agree that my child's image or likeness in photographs, videos, or audio may be used for educational or promotional purposes, including posting on the Internet. I agree that the use herein may be without compensation to me or my child. I hereby waive any right to inspect or approve the finished electronic, photograph, or printed matter that may be used in conjunction with them now or in the future. I am expressly releasing NC State, its agents, employees, licensees and assigns from any and all claims which I may have for invasion of my or my child's privacy, right of publicity, defamation, copyright infringement, or any other causes of action arising out of the use, adaptation, reproduction, distribution, broadcast or exhibition of such recordings.

I understand that this is a legal document which is binding on me, my heirs and assigns and on those who may claim by or through me. I am eighteen years of age or older, and have full capacity to enter into this agreement and do so voluntarily.

I HAVE READ THIS AGREEMENT, I UNDERSTAND IT AND

I AGREE TO BE BOUND BY IT.

Signature of Parent/Guardian: _____

Date: _____

Printed Name: _____

Printed Name of Child: _____