



**SHOWCASE ENTRY FORM**  
 SHOWCASE DATES: FEBRUARY 27 & 28 and JUNE 6 & 7  
 MCCLAIN COUNTY EXPO CENTER, PURCELL, OKLAHOMA  
**PLEASE COMPLETE THIS FORM FRONT AND BACK COMPLETELY AND LEGIBLY**

PRE-ENTRY CLOSING DATE: SATURDAY, FEBRUARY 15 and MAY 30

Horse #1					
Name of Horse:	Year Foaled:	Breed:	Color:	Sex:	Height:
Sire:	Dam:				
Horse AMHA #(if applicable):	Horse WDAA #(if applicable):	GaitKeeper # (Office use only)	Horse # (Office use only)		

Rider #1								
Rider/Driver/Handler:			Rider DOB:	Rider AMHA # (If applicable):			Rider ODS# (If applicable):	
Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:

**Division Declared for High Point: Amateur / 13 or Under / 14-17 / Walk Trot**

Horse #2					
Name of Horse:	Year Foaled:	Breed:	Color:	Sex:	Height:
Sire:	Dam:				
Horse AMHA #(if applicable):	Horse WDAA #(if applicable):	GaitKeeper # (Office use only)	Horse # (Office use only)		

Rider #2								
Rider/Driver/Handler:			Rider DOB:	Rider AMHA # (If applicable):			Rider ODS# (If applicable):	
Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:	Class # / Test #:

**Division Declared for High Point: Amateur / 13 or Under / 14-17 / Walk Trot**

	Rider #1	Rider #2	Total
Morgan Rail Class Fee: \$15 per Class	# of Classes \$	# of Classes \$	# of Classes \$
Morgan Championship Fee: \$30 per Class	# of Champ. Classes \$	# of Champ. Classes \$	# of Champ. Classes \$
Academy / All Breed Rail Class Fee: \$10 per Class	# of Classes \$	# of Classes \$	# of Classes \$
Academy / All Breed Championship Fee: \$15 per Class	# of Champ. Classes \$	# of Champ. Classes \$	# of Champ. Classes \$
Jackpot Classes: \$30 per horse	# of Jackpot Classes \$	# of Jackpot Classes \$	# of Jackpot Classes \$
Tie Out Fee: \$15 per horse	\$	\$	\$
Stall Fee: includes 1 bag of bedding.	Fri-Sat: \$55	\$	\$
	Fri-Sun: \$75	\$	\$
Additional Bedding: \$8 per bag. <b>No outside bedding allowed. Bedding must be purchased from McClain County Expo and supports the Roundup Club.</b>	# of Bags \$	# of Bags \$	# of Bags \$
Buy-a class: \$25 per class in addition to regular class fee. <b>Please specify class(es) below.</b>	# of Buy-a Classes \$	# of Buy-a Classes \$	# of Buy-a Classes \$
Buy-a Class #:	Buy-a Class #:	Buy-a Class #:	
Buy-a Class #:	Buy-a Class #:	Buy-a Class #:	
SSMHA Club Membership (See application for dues):	\$	\$	\$
SSMHA Donation (Any amount appreciated):	\$	\$	\$
RV Hookup: \$30 per Hookup	\$	\$	\$
Post Entry Fee: \$25 per rider	\$	\$	\$
Office Fee: \$25 per rider	\$	\$	\$
<b>Sub-Total</b>	\$	\$	\$
Credit Card Convenience Fee: 3.5%:	\$	\$	\$
<b>Grand Total:</b>	\$	\$	\$
	Check #	Check #	Check #

Select Method of Payment:

**PLEASE COMPLETE PAGE 2 - Waiver**

Cash / Check (Payable to SSMHA.) / Credit Card (Convenience Fee: 3.5%) / Venmo

Mail Entry Form and Payment to Stephanie Edwards, SSSMHA Show Secretary, 1825 SW 30th, Moore, Ok 73160  
 Or email to SoonerStateMHA@gmail.com (PDF of form preferred)

**One OWNER Per Entry Blank - Complete Both Sides of this Form.**

**For Morgan Horse Exhibitor:**

Please enclose copies of registration papers, USEF & AMHA cards of Owner, Trainer, and each rider/driver/handler. All Fees Must Accompany this ENTRY.

**Release, Assumption of Risk, Waiver and Indemnification**

This documents 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, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware & acknowledge that horse sports & the Competition involve inhearent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("harm").

I **AGREE** to hold harmless and release the SSMHA Inc./Competition and the McClain Count Expo Center 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 Federation, SSMHA Inc. or the Competition.

I **AGREE** to indemnify (that is, to pay any losses, damages, or costs incurred by) the McClain County Expo Center, SSMHA 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 have read the Federation rules about Protective equipment, including GR801 and , if applicable, EV114 and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation 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, consent to the child's participation and AGREE to all 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 requisite training, coaching and abilities to safely compete in this competition.

#1 Rider/Driver, or Handler 1 (Mandatory)		
Name:	AMHA # (if applicable):	ODS # (if applicable):
Address:	Phone:	WDAA # (if applicable):
City, State, Zip:	E-mail Address	
By signing I have read & I agree to the USEF Entry Agreement and Release in the prize list & printing above.	Signature (Parent/Guardian if Under 18):	
#2 Rider/Driver, or Handler 2 (Mandatory)		
Name:	AMHA # (if applicable):	ODS # (if applicable):
Address:	Phone:	WDAA # (if applicable):
City, State, Zip:	E-mail Address	
By signing I have read & I agree to the USEF Entry Agreement and Release in the prize list & printing above.	Signature (Parent/Guardian if Under 18):	
Owner (Mandatory)		
Name:	AMHA # (if applicable):	ODS # (if applicable):
Address:	Phone:	WDAA # (if applicable):
City, State, Zip:	E-mail Address	
By signing I have read & I agree to the USEF Entry Agreement and Release in the prize list & printing above.	Signature (Parent/Guardian if Under 18):	
Trainer (Mandatory)		
Name:	AMHA # (if applicable):	ODS # (if applicable):
Address:	Phone:	WDAA # (if applicable):
City, State, Zip:	E-mail Address	
By signing I have read & I agree to the USEF Entry Agreement and Release in the prize list & printing above.	Signature (Parent/Guardian if Under 18):	

**Please enclose copies of all membership cards (AMHA, ODS, WDAA, USDF, USEF) for horses eligible for life time and year end high point awards.**