



WCHA FOAL ENTRY FORM

*****Please include copy of horse registration papers*****

Horse's Registered Name: _____

Foaling Date: _____

Registration Number: _____

Breed: (CIRCLE all that apply) AQHA APHA PHBA ARBA ApHC

Sex: (CIRCLE ONE) Stallion Mare Gelding

Sire: _____ Dam: _____

Owner: _____

Address: _____

City _____ State _____ Zip _____

Person Making Entry: _____

Phone Number: _____ Email: _____

Exhibitor: OPEN: Name of person showing: _____ Relationship: _____

Is this horse bred, owned and shown by the same person? (CIRCLE ONE) Yes No

For Weanling Geldings/Stallions and Weanling Filly Entry Fees are Per Class.

For: Open Classes

The entry fee is \$300 per class if paid before August 1. After August 1, entry fee is \$350 per class.

Must be a member of both ECHF and WCHA.

All the entry fees will go in the pot along with 1,000 added to each class.

CHECK CLASSES YOU WISH TO ENTER:

WEANLING Stallion, Gelding Classes ____ OPEN WEANLING STALLIONS ____ OPEN WEANLING GELDINGS	WEANLING Filly Class ____ OPEN WEANLING FILLIES

With WCHA membership, you will get 1 year free subscription to the Equine Chronicle

ONE ENTRY FORM PER HORSE

NO REFUNDS FOR ANY REASON

RELEASE OF LIABILITY FORM

ECHF will not be held responsible for any accidents or personal injury. Member agrees to release and hold harmless ECHF, ECHF Show Facility, Agent and their respective agents, employees, representatives, assigns, affiliated persons, and/or others acting on their behalf from liability for ordinary negligence relating to any and all injuries, damages, personal property damages or losses that Member may sustain arising out of being on the premises of the ECHF Show Facility.

I/we hereby WAIVE any right to sue or to bring any action against the East Coast Halter Futurity in connection therewith including any negligent act or omission by either of them or by any employee or agent of either of them; I/we hereby agree to INDEMNIFY and HOLD HARMLESS the East Coast Halter Futurity from and against any such suit or action and agree to pay any attorney fees which may arise if any such suit or action is filed; and I/we hereby expressly ASSUME ALL RISKS AND DANGERS of death, personal injury and property damage which are in any way associated with the East Coast Halter Futurity.

Signature: _____ Date: _____

***** ECHF reserves the right to disqualify anyone for any reason if they feel necessary and ethical. By signing you agree to all terms rules and decisions made by the ECHF.**

*****Signature: _____ Date: _____**

Please sign and date this form. Send your check for your foal nomination form and this signed form to:

**East Coast Halter Futurity
3711 E Chestnut Avenue :: Vineland, NJ 08361**