

Magnolia Spring Classic ~ Region 4 Championship

April 19-21, 2025 - Georgia National Fairgrounds - Perry, GA

Entries close April 1st. Enter Online at www.ringsideproductionsllc.com

Please type or print. One horse per entry form. All entries must be complete & must include correct fees, copies of horse registration papers, statement of ownership if purchased on contract, USEF/IFSHA membership card for each owner, rider/driver/handler & USEF Amateur card for each Amateur rider, driver & handler. Entries close & must be postmarked on or before April 5, 2024. Post Entries are accepted with post entry fee.

	HORSE NAME	REG#	SEX	COLOR	HEIGH	T AGE	DATE OF BIRTH	USEF HORSE ID#	IFSHA HORSE I		
								• OWNER ID#•			
	PUREBRED SIRE: Breed of Other Parent: (if applicable)						USEF#	IFSHA #	IALHA #		
CLASS			DATE OF BIRTH USER		# IALHA#	IFSHA#	AMATEUR Y/N#	ENTRY FE	Œ		
MAKI	E ALL CHECKS PAYABLE TO MAHA, Inc.	:		7	Total I	Entry F	ees				
Rya P.O Bon 314-	ENTRY FORM & CHECK TO: in Chambers . Box 508 ine Terre, MO 63628 .717-7683 n@ringsideproductionsllc.com		Horse/Tack Stalls \$150 Office Fee \$30 per horse USEF Fee \$23 per horse EMT Fee \$10 per horse Non Dressage Classes \$40/class								
Check Open (OFFICE USE ONLY: #Amount Check	$\neg =$	Dressage Classes \$50/class Division Fee (if app) \$10/div Post Entry Fee \$40 after April 1st								
Addr	er:	_	otal I	Enclos	ed				_		
Telep1	State, Zip: hone: l:	_	IFSHA Memberships (Owner & Horse) are to be completed at the IFSHA Office at least 5 days in advance of the start of the show. Contact Debra Goldmann at ifsha1994@gmail.com.								
Stayinş	g At	Even	though	this ent	ry is pai	d in full, រ	an open cho	N REVERSE eck must be s will be relea	given		
	oneestable with										



FEDERATION ENTRY AGREEMENT

Is Rider/Driver/Vaulter a U.S. Citizen: ___Yes ___ No

Vaulter or Longeur and on behalf of myself and my principals, represer of The United States Equestrian Federation, Inc. (the "Federation") and bound by the Bylaws and Rules of the Federation and of the competition under the Rules, and agree to release and hold harmless the competition the Rules. I represent that I am eligible to enter and/or participate und a condition of and in consideration of acceptance of entry, the Federatic casts, broadcasts, internet, film, new media or other likenesses of me or benefit of the competition, sport, or the Federation. Those likenesses to jeopardize amateur status. I hereby expressly and irrevocably waive	plank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Intatives, employees and agents, I agree that I am subject to the Bylaws and Rules of the local rules of (Competition). I agree to be on. I will accept as final the decision of the Hearing Committee on any question arising ion, the Federation, their officials, directors and employees for any action taken under ler the Rules, and every horse I am entering is eligible as entered. I also agree that as ion and/or the Competition may use or assign photographs, videos, audios, cable and my horse taken during the course of the competition for the promotion, coverage is shall not be used to advertise a product and they may not be used in such a way as and release any rights in connection with such use, including any claim to compensaconstruction and application of Federation rules are governed by the laws of the State filed in New York State. See GR908.4.					
USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (M	e to be bound by all applicable Federation Bylaws, rules, and policies including the MAAPP) as published at www.usef.org, as amended from time to time, as well as all g this Agreement electronically, I acknowledge that my electronic signature shall y my own hand.					
RIDER/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)	OWNER/AGENT (mandatory)					
Signature:	Signature:					
Print Name:	D : 1 N					
TRAINER (mandatory)	COACH (if appicable)					
Signature:	Signature:					
Print Name:	Print Name:					
Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is	s a minor)					
Print Parent//Guardian Name:	Emergency Contact Phone No					