

Paint, Quarter Horse, Palomino, Appaloosa, Low Hunter, Miniature, Walking Horse

SECTION I - NEW YORK STATE FAIR HORSE SHOW
 NEW YORK STATE FAIR COLISEUM - SYRACUSE, NEW YORK

WHITE ENTRY FORM

Entry Number _____

ONLY ONE HORSE TO EACH ENTRY BLANK - PLEASE ENCLOSE COPIES OF REGISTRATION PAPERS AND MEMBERSHIP CARDS

NAME OF HORSE	Sex	Year Foaled	Registration # & Breed	Registration # & Breed

YOUTH CLASSES

Office Use	Name of Youth Rider		Youth #		Date of Birth		Relation To Owner	
	Street Address		Class #s					Entry Fee
	City	State	Zip					

AMATEUR CLASSES

Office Use	Name of Amateur Rider		Amateur #		Issued By		Relation To Owner	
	Street Address		Class #s					Entry Fee
	City	State	Zip					

OPEN PERFORMANCE/OPEN HALTER CLASSES

Office Use	Name of Rider/Driver/Handler		Membership #	Class #s First Rider				Entry Fee
	1. _____							
	2. _____		Membership #	Class #s Second Rider				

OWNER INFORMATION - PLEASE PRINT

Owner's Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____

Owner ID# _____ Breed _____

Owner ID# _____ Breed _____

Social Security # _____ EMail _____

Box Stalls @	
Tie Stalls @ \$	
Office Fee @ \$15.00 per horse	
Spectator Boxes: 6 Seats 9 Seats 12 Seats	
\$50.00 \$75.00 \$100.00	
Palomino Fee @ \$21.00 (3 Judges)	
Paint Fee per horse @ \$6.00 (2 Judges)	
AQHA Fee @ \$15.00 (2 judges + special event)	
ApHC Fees Per Class	
TOTAL AMOUNT	
AMOUNT ENCLOSED	
BALANCE DUE	

TRAINER'S NAME _____

TRAINER'S PHONE _____

I certify that every horse and/or rider or driver is eligible as entered. I make these entries at my own risk and subject to rules of this show and I agree to be bound thereby. I agree to make no claims against the New York State Fair if any damages be occasioned or loss occur to any vehicle, equipment or animal which I send to the show, and I agree to pay the show the sum of \$100 as and for liquidated damages if any animal which I exhibit is suffering from contagious disease. And I further agree that the New York State Fair Show shall reserve the right to reject this entry without being liable for compensation.

I AGREE TO ABIDE BY THE NEW YORK STATE DRUG LAW, REFUSAL TO BE TESTED WILL RESULT IN FORFEITURE OF ENTRY FEES, STALL FEES, PREMIUMS AND PRIZES, AND FURTHER DISCIPLINARY ACTION AS PRESCRIBED BY LAW.

Signature Below Indicates That Signer Has Read and Understands All of The Above

Owner, Agent, or Parent's Signature _____

STABLE WITH: _____

Number of Miniature Horse Gates Requested: _____

BOX STALL FEES
Appaloosa/Paint/Palomino: \$30.00
WPCSA \$40.00 ALL OTHERS: \$60.00
TIE STALLS: \$40.00

ENTRY & STALL FEES MUST ACCOMPANY THIS FORM
All Premium Checks will be made payable to owner of horses.
Premium checks will not be paid without owner's social security number.

Canadian Checks Must Be Marked: Payable in U.S. Funds
MAKE CHECKS PAYABLE TO: NY State Fair
Mail To: NYS Fair Entry Dept, 581 State Fair Blvd, Syracuse, NY 13209
 FMI: Naomi Blumenthal - nblumenthal@twcny.rr.com

Name to appear on Coliseum box (if ordered) _____

WHITE ENTRY FORM

USEF Divisions - Section 2

Green Entry Form

NEW YORK STATE FAIR HORSE SHOW
 NEW YORK STATE FAIR COLISEUM - SYRACUSE, NEW YORK

Entry Number _____

ONLY ONE HORSE TO EACH ENTRY BLANK

Horse No. Office Use Only	NAME OF HORSE	Breed Reg. #	Color	Age	Sex	Height	Horse's USEF #	
								1st Year Green <input type="checkbox"/>
ENTRY FEES	Write Class #s Below Name of Corresponding Rider/Driver/Handler						Rider Is: Jr. or Am.	Rider's/Driver's USEF # ▼
	Name of Rider/Driver ▶							
								Rider's/Driver's USEF # ▼
	Name of Rider/Driver ▶							
							Handler's USEF # ▼	
Name of Handler ▶								
				SIRE		DAM		

Ponies Specify: Small _____ Medium _____ Large _____
 Amateurs Specify: 18-35 _____ 36 & O _____
 Junior Hunters Specify: Small _____ Large _____
 Rider's UPHA# _____
 Rider's ASPCA# _____
 Junior Rider's Date of Birth: _____

Qty.		Amount
	TOTAL ENTRY FEES	
	Box Stalls @ \$80.00	
	Office Fee @ \$ 15.00 per horse.	\$10.00
	Spectator Boxes: 6 Seats \$80.00/9 Seats \$110.00/12 Seats \$160.00	
	USEF FEE (D&M \$7, USEF \$8)@ Per Horse	\$15.00
	Non-USEF Members Showing Fee @ 30.00	
	Non-USHJA Members Showing Fee @ \$30.00 (H/J Exhibitors Only)	
	All Hunters/Jumpers Fee @ \$35.00	
	USHJA Zone Fee (H/J Only)	\$ 2.00
	TOTAL AMOUNT	
	AMOUNT ENCLOSED	
	BALANCE DUE	

**ENTRY & STALL FEES
 MUST ACCOMPANY THIS FORM**
 Canadian Checks Must Be Payable in U.S. Funds
 MAKE CHECKS PAYABLE TO: **NYS Fair**
RETURN TO: NYS Fair Horse Show
 NYS Fair Entry Dept
 581 State Fair Blvd
 Syracuse, NY 13209
 (315) 682-1933
 nblumenthal@twcny.rr.com

Please use the separate form to order RV parking.

If ordered, Name requested on Box Seats:

Signatures Required On The Reverse Side Before Entry Can Be Accepted

Print Rider's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ ASHA# _____ Email Address _____	Print Trainer's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ ASHA# _____ Email Address _____	Print Owner's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ ASHA# _____ Email Address _____
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Coach's Name _____ USEF # _____ Telephone _____	STABLE WITH: _____	Owner's Social Security # _____ Required For Premium Payments
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FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation Inc. (the "Federation") and the local rules of Lehman Farms Horse Shows. I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likeness of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4

Federation Release, Assumption of Risk, Waiver and Indemnification

This document waives important legal rights. Read it carefully before signing.

I AGREE in consideration for my participation in this The New York State Fair Horse Show to the following:

I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their official officers, directors, employees, agents, personnel, volunteers and Federation affiliates. The Licensed Competition Manager is the Naomi Blumenthal & Equine Productions and Marketing. The Licensed Competition Management is the NY State Fair.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver handler, vaultor, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent 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 Federation and the Competition 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 or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation 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, I consent to the child's participation and AGREE to all of 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.

I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment to the Federation on the official USEF accident/injury report form.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

<u>Rider/Driver/Handler/Longeur (mandatory)</u>	<u>Owner/Agent (mandatory)</u>	<u>Trainer (Mandatory)</u>	<u>Coach (if applicable)</u>
Signature	Signature	Signature	Signature
Print Name	Print Name	Print Name	Print Name
Signature Rider 2	Print Name Rider 2		

Parent/Guardian Signature (Required if #1 rider/driver/handler/vaultor/longeur is a minor) _____

Print Parent/Guardian Name: _____ Emergency Contact Phone#: _____

Parent/Guardian Signature (Required if #2 rider/driver/handler/vaultor/longeur is a minor) _____

Print Parent/Guardian Name: _____ Emergency Contact Phone#: _____

Is #1 Rider/Driver/Vaultor a U.S. Citizen ____ Yes ____ No Is #2 Rider/Driver/Vaultor a U.S. Citizen ____ Yes ____ No

Signature & Membership # Required In Each Category

<p>BLOCKSTABLING SPECIAL NOTE TO ALL TRAINERS: Please use this form to list all of the individual owners/exhibitors who will be stabled with you and return it to the Show Secretary immediately. In this way, we hope to be able to accommodate everyone's wishes. THE ACCURATE COMPLETION AND PROMPT RETURN OF THIS STABLING LIST IS IMPORTANT IN ASSURING YOUR GROUP RESERVED STABLING.</p> <p>LIST BY OWNER'S NAME, NOT HORSE.</p> <p>STABLE NAME: _____</p> <p>NAME OF OWNER _____ # of Stalls _____</p>	<p>Date of Arrival _____</p> <p>TOTAL STALLS _____</p> <p>Trainer's Name _____ Telephone # _____</p>
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USEF Recognized Arabian, Half-Arabian, Welsh, Opportunity Classes

SECTION I - NEW YORK STATE FAIR HORSE SHOW
 NEW YORK STATE FAIR COLISEUM - SYRACUSE, NEW YORK
ONLY ONE HORSE TO EACH ENTRY BLANK

Yellow Entry Form

Entry Number _____

Horse No. Office Use Only	NAME OF HORSE	Breed Reg. #	Color	Age	Sex	Height	Horse's USEF #	
ENTRY FEES								
Write Class #s Below Name of Corresponding Rider/Driver/Handler							Rider's/Driver's ▼ AHA/WPCSA# ▼	Rider's/Driver's ▼ USEF # ▼
Name of Rider/Driver ▶								
							Rider's/Driver's ▼ AHA/WPCSA# ▼	Rider's/Driver's ▼ USEF # ▼
Name of Rider/Driver ▶								
							Handler's ▼ AHA/WPCSA# ▼	Handler's ▼ USEF # ▼
Name of Handler ▶								
SIRE							Dam	

Junior Exhibitor's DOB: _____

**ENTRY & STALL FEES
 MUST ACCOMPANY THIS FORM**

Canadian Checks Must Be Marked:

Payable in U.S. Funds

MAKE CHECKS PAYABLE TO: **NYS Fair**

RETURN TO: NYS FAIR HORSE SHOW
 NYS Fair Entry Dept.
 581 State Fair Blvd
 Syracuse, NY 13209
 nblumenthal@twcny.rr.com

Please use the separate form and separate checks to purchase parking.

Qty.		Amount
	TOTAL ENTRY FEES	
	Box Stalls @ \$60.00	
	Welsh Race Barn Stall @ \$40.00	
	Spectator Boxes: 6 Seats \$50.00/9 Seats \$75.00/12 Seats \$100.00	
	Horses @ \$15.00 USEF FEE (D&M \$7, USEF \$8)	\$15.00
	USEF Non-Member Fee @ \$30.00	
	Office Fee @ \$15.00 per horse	\$15.00
	AHA Single Event Fee @ \$30.00	
	WPCSA Fee @ \$3.00 per pony \$6.00 for breed pony	
	AHA Resolution 9-90 @ \$3.00 per horse	
	TOTAL AMOUNT	
	AMOUNT ENCLOSED	
	BALANCE DUE	

Signatures Required On The Reverse Side Before Entry Can Be Accepted

Print Rider's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ AHA# _____ Email Address _____	Print Trainer's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ AHA# _____ Email Address _____	Print Owner's Name _____ Street _____ City _____ State _____ Zip _____ Telephone _____ USEF # _____ AHA# _____ Email Address _____
Coach's Name _____ USEF # _____ AHA# _____	Stable With: _____	Owner's Social Security # _____

Draft Horses, Draft Ponies, Haflingers

BLUE ENTRY FORM

Entry Number _____

NEW YORK STATE FAIR HORSE SHOW
NEW YORK STATE FAIR COLISEUM - SYRACUSE, NEW YORK

ONLY ONE OWNER TO EACH ENTRY BLANK - Please Print Use This Side For Performance Classes ONLY- Halter Classes On Back

OFFICE USE ONLY	DRIVER	CLASSES										Youth's DOB	ENTRY FEES
	Driver #1												
	Driver #2												
	Driver #3												
	Driver #4												
	Driver #5												
	Driver #6												
	Driver #7												

Name of Driver eligible for Novice Reinsman Award:

OWNER INFORMATION - PLEASE PRINT

Owner's Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____

Social Security # _____ Email _____

TRAINER'S NAME _____

TRAINER'S PHONE _____

I certify that every horse and/or rider or driver is eligible as entered. I make these entries at my own risk and subject to rules of this show and I agree to be bound thereby. I agree to make no claims against the New York State Fair if any damages be occasioned or loss occur to any vehicle, equipment or animal which I send to the show, and I agree to pay the show the sum of \$100 as and for liquidated damages if any animal which I exhibit is suffering from contagious disease. And I further agree that the New York State Fair Show shall reserve the right to reject this entry without being liable for compensation.

I AGREE TO ABIDE BY THE NEW YORK STATE DRUG LAW, REFUSAL TO BE TESTED WILL RESULT IN FORFEITURE OF ENTRY FEES, STALL FEES, PREMIUMS AND PRIZES, AND FURTHER DISCIPLINARY ACTION AS PRESCRIBED BY LAW.

Signature Below Indicates That Signer Has Read and Understands All of The Above

Owner, Agent, or Parent's Signature _____

ALL HEALTH PAPERS MUST ACCOMPANY HORSES.

EARLIEST ARRIVAL TIME:

Draft Horses - After 10 A.M., Monday, August 30th

Please use the separate form and separate checks to order RV parking.

TOTAL ENTRY FEES - Halter Classes	
TOTAL ENTRY FEES - Hitch Classes	
Draft Halter Box Stalls Only Mon-Tues. @\$15.00	
Draft Pony and Haflinger Box Stalls @ \$60.00	
Draft Pony and Haflinger Tie Stalls @ \$20.00	
All Tack Stalls @ \$80.00	
Draft Hitch Stalls @ \$20.00 (Qty.Box ___Qty.Tie ___)	
Office Fee @ \$10.00 per horse	
Spectator Boxes: 6 Seats 9 Seats 12 Seats	
\$80.00 \$110.00 \$160.00	
TOTAL AMOUNT	
AMOUNT ENCLOSED	
BALANCE DUE	

Total # of Animals on this form:

ENTRY & STALL FEES MUST ACCOMPANY THIS FORM

All Premium Checks will be made payable to owner of horses. No Premium checks will be paid without owner's social security number.

Canadian Checks Must Be Marked: Payable in U.S. Funds

MAKE CHECKS PAYABLE TO: **N.Y. State Fair**

Return To: **N.Y. State Fair Entry Dept**
581 State Fair Blvd
Syracuse, NY 13209

Naomi Blumenthal, Superintendent: nblumenthal@twcny.rr.com
315.436.1933

Draft horses are requested to vacate Halter Stalls as soon as their Halter Classes are over.

Name to appear on Box Seats (if purchased)

Stable With:

Owner's SS or Fed ID #

NYS FAIR HORSE SHOW EXHIBITORS' PARKING APPLICATION

Parking Permit for Automobiles \$ _____ Total Amount Enclosed

Parking **MUST** be paid with a separate check.

Name _____	Date(s) Requested for Permits: _____
Address _____	
City, State, Zip _____	Breed Showing

ONE DAY PARKING - \$10.00 Per Day per Automobile. \$ _____ Enclosed

SECTION I - 8/25-8/28 - \$40.00 per Automobile for _____ Parking Permit(s) = \$ _____ Enclosed

SECTION II - 8/31 - 9/5 - \$60.00 per Automobile for _____ Parking Permit(s) = \$ _____ Enclosed

Parking **MUST** be paid with a separate check.

Preferred Auto Parking Not Sold In Race Barn Area

PARKING PERMIT INCLUDES A 10 MINUTE DROP-OFF AT THE BARN & PARKING IN A DESIGNATED AREA IN THE BROWN PARKING LOT

Temporary RV Parking \$ _____ Total Amount Enclosed

Name _____

Address _____

City, State, Zip _____

Tow Vehicle Required? Yes No

ONE NIGHT RV - 8/22 - 8/24 - \$20.00 per RV per night for _____ Parking Permit(s) = \$ _____ Enclosed

Two Nights Will Cost \$40.00 Total Number of Nights @ \$20.00 _____

Camper will Arrive: _____ Depart: _____ Main Barns Race Barn

PINK LOT

SECTION I - 8/25-8/28 \$ 100.00 per RV for _____ Parking Permit(s) = \$ _____ Enclosed Main Barns

SECTION II - 8/29-9/05 \$ 160.00 per RV for _____ Parking Permit(s) = \$ _____ Enclosed Main Barns

GREEN LOT ACROSS FROM RACE BARN

SECTION I - 8/25-8/28 \$100.00 per RV for _____ Parking Permit(s) = \$ _____ Enclosed Race Barns

SECTION II - 8/30-9/04 \$120.00 per RV for _____ Parking Permit(s) = \$ _____ Enclosed Race Barns

Parking Must Be Paid With A Separate Check

NO REFUNDS ON PARKING AT ANY TIME

Please Read Parking Information on the Back of This Form

All fees must be submitted by **CHECK & ACCOMPANY THIS APPLICATION**

Enclose a Check for Parking Only payable to NYS Fair

Mail to: Geneanne Keegan-Smith, NYS Fair, 581 State Fair Blvd., Syracuse, NY 13209

Parking Credentials Will Be Mailed To The Address On This Form. Credentials for Canadian Exhibitors Will Be Held In Show Office

Lost Or Forgotten Credentials Cannot Be Replaced

FOR MORE INFORMATION OR QUESTIONS:

Contact Naomi at nblumenthal@twcny.rr.com or 315 436 1933 between 10 AM and 7 PM

PARKING

ATTENTION EXHIBITORS - PLEASE READ CAREFULLY

EXHIBITOR TEMPORARY RV PARKING

Temporary RV parking must be requested on the reverse side of this form.

Please note that all camper parking for exhibitors in the Coliseum area will be located across State Fair Blvd in the Pink Lot. (See Map) Payment must accompany requests. Parking permits will be mailed if purchased early. All others will be held in show office.

All Temporary RV spaces include electricity, water and one sewage pump out.

In the Main Barn area, RV units will be accommodated in the Pink parking lot. Tow vehicles may remain attached, in most instances. Arrivals and Departures at any time. Directions for access to the parking area will be sent with the stickers. Spaces will be numbered and exhibitors will be assigned a specific space.

The Pink RV Lot has enhanced electrical services and a new shower and rest room facility. Gate 4 will remain open 24 hours a day, every day, for access to the horse barn area.

Exhibitors stabling in the race barns will be assigned temporary RV parking in the Green area. These RVs may arrive at any hour and will be able to leave tow vehicles attached. Most hookups in this area include sewers.

Spaces will be allocated on a first-come basis by the Superintendent. Requests will not be honored unless approved by the Superintendent. Any changes must be approved by the Stable Manager. Horse trailers, passenger vehicles, vans without factory installed living quarters, etc. will **NOT** be allowed in RV areas.

**TEMPORARY RV PARKING
MAY NOT BE PURCHASED
AND USED FOR PASSENGER VEHICLES**

PAINT, APPALOOSA, PALOMINO

8/22 through 8/24 at 7 PM (per night) \$20.00
SECTION I - Wednesday 8/24 to 11 PM Sunday 8/28 \$100.00
SECTION II - Pink Lot Mon 8/29 through duration of the fair \$160.00
SECTION II - Race Barns - 8/30-9/4 \$120.00

EXHIBITOR AUTO PARKING

Exhibitors not purchasing Preferred Parking will be issued a complimentary parking pass for a perimeter parking lot. Reserved parking spaces will be available in the Brown parking area for exhibitor parking. Reserved parking is for passenger vehicles ONLY.

Brown parking must be requested on the form provided for that purpose. Payment must accompany requests. Parking stickers will be mailed and WILL NOT BE REPLACED IF LOST OR STOLEN. Absolutely NO TELEPHONE REQUESTS for parking will be honored.

Exhibitors showing in the Race Barn Ring will receive complimentary Auto parking passes in the Gray Parking Area near the Race Barn Area.. The RVs for the Race Barn Area will be in the Green Parking Area.

8/22 - 8/24 NOSTICKERS REQUIRED
ANY SINGLE DAY \$10.00
SECTION I - 8/25 - 8/28 \$40.00
SECTION II - 8/30 - 9/05 \$60.00