



REGION 5 ARABIAN HORSE ASSN. CASCADE ARABIAN YOUTH BENEFIT SHOW

The Tacoma Unit – Spanaway, Washington
March 20 – 22, 2026

ENTRIES OPEN 02/07/2026 *EARLY ENTRIES CLOSE 02/28/2026

EMAIL TO:
DENISE CUMMINGS
tedndenise@msn.com
Questions? 509-280-5800

13112 E. Black Rd
Chattaroy, WA 99003

HORSE	Horse's Registered Name		Registration# required	Birthdate MM/DD/YYYY		Gender ☐ G ☐ M ☐ S	☐ ARABIAN ☐ HALF-ARABIAN ☐ OPPORTUNITY
	Sire	Dam		Height	Color	WDAA Horse #	

*Arabians: No leading "Zero" only number. Half-Arabians include 1A#, 2A#, etc. Canadian Registry start with CAHR# or CPAR#.

OWNER	OWNER (Exactly as it appears on horse registration papers or contract, include joint owners)			OWNER AHA Competition #	OWNER WDAA#
	OWNER ADDRESS			OWNER BEST Phone#	
	OWNER CITY	OWNER ST	OWNER ZIP	OWNER Email	

TRAINER	TRAINER (must be filled out, if there is no trainer, owner may write <u>SAME</u> in trainer information)			TRAINER AHA Competition #	TRAINER WDAA#
	TRAINER CURRENT ADDRESS			TRAINER BEST Phone#	
	TRAINER CITY	TRAINER STATE	TRAINER ZIP	TRAINER Email	

RIDER 1	RIDER 1 NAME		1 Are you Amateur/Junior Exhibitor ☐ YES ☐ NO		1 Birthdate: MM/DD/YY Required		1 AHA Competition #		1 WDAA #				
	1 CURRENT ADDRESS		1 CITY		1 STATE		1 ZIP		1 BEST Phone#		1 Email		
	1 CLASS NUMBER												1 TOTAL \$.
	1 CLASS FEE												

RIDER 2	RIDER 2 NAME		2 Are you Amateur/Junior Exhibitor ☐ YES ☐ NO		2 Birthdate: MM/DD/YY Required		2 AHA Competition #		2 WDAA#				
	2 CURRENT ADDRESS		2 CITY		2 STATE		2 ZIP		2 BEST Phone#		2 Email		
	2 CLASS NUMBER												2 TOTAL \$.
	2 CLASS FEE												

RIDER 3	RIDER 3 NAME		3 Are you Amateur/Junior Exhibitor ☐ YES ☐ NO		3 Birthdate: MM/DD/YY Required		3 AHA Competition #		3 WDAA#				
	3 CURRENT ADDRESS		3 CITY		3 STATE		3 ZIP		3 BEST Phone#		3 Email		
	3 CLASS NUMBER												3 TOTAL \$.
	3 CLASS FEE												

EVERYONE PAYS

Office Fee per horse \$
AHA Results Fee per horse \$
Resolution 9-90 per horse \$
MISCELLANEOUS
Class Sponsorship each \$
High Point Sponsor \$
Donations to **Region 5 Youth** (enter total \$) \$
Hunter Schooling Tickets per round \$
Non Competing Horse \$
Late Entry Fee entries **received** after 2/28. \$
* AHA Single Event Fee \$
* For AHA Basic members and non-members showing in AHA classes \$

FACILITIES

FULL Tack Fee weekend \$
FULL Stall Fee weekend \$
FULL Shavings removal per stall \$
DAY Tack Fee one day \$
DAY Stall Fee one day \$
DAY Shavings removal per stall \$
Haul-In Fee per day (no stall) \$
Overnight RV/Camping per night \$

ENTRIES

FEES \$
CHECK TOTAL \$
Convenience Fee \$
PAY PAL TOTAL \$

Make checks payable to **CYB** or **Cascade Youth Benefit**
Check / Entries must be **received by 2/28** to avoid late entry fee
Pay **PAYPAL** same day entry is emailed
<https://paypal.me/cybshow>



Please read and complete release

REGION 5 ARABIAN HORSE ASSN and AHA ENTRY AGREEMENT

I have read the rules concerning competitions as printed in the Prize List, the Arabian Horse Association® (AHA®) Handbook and the Value Show Rules and agree to be bound by and subject to those Rules **and understand all decisions made by the judge are deemed final and cannot be protested.**

AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION

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

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

I AGREE that I choose to participate voluntarily in this Competition, as a rider, driver, handler, leasee, owner, agent, coach, trainer, junior exhibitor, or as a parent or guardian of a junior exhibitor. **I AM FULLY AWARE AND ACKNOWLEDGE THAT HORSE SPORTS AND PARTICIPATION IN THIS COMPETITION INVOLVE SERIOUS RISK OF HARM INCLUDING, BUT NOT LIMITED TO, RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN AND SUFFERING, AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF HARM TO ME, MY HORSE OR MY PROPERTY.**

I AGREE as a Horse Show Participant (or Parent/Guardian of Participant if a minor) to waive all claims which may otherwise arise from, including but not limited to infectious bacteria, viruses, fungi/mold, parasites or other agents which may be present at the Horse Show (and most other outdoor locations) and can cause infection in humans, as well as in animals.

I AGREE for myself, my heirs, executors, administrators, successors and assigns to release AHA, the Competition, the facilities leased by the Competition and the owner(s) of the facilities, and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and **all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me to the fullest extent** permitted by law that arises out of or relates in any way to the Competition and my participation in the Competition **INCLUDING, BUT NOT LIMITED TO, DAMAGES, LOSS, OR INJURY RESULTING FROM ANY ACTS, FAILURE TO ACT, NEGLIGENCE OR NEGLECT OF OTHER ENTRANTS, THE RELEASED PARTIES, THEIR CONTRACTORS OR INVITEES**, as well as for theft, vandalism, fire, other casualty damage, or damage arising out of any defects in the premises.

I AGREE to indemnify and hold harmless (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorney's fees) of whatsoever kind and nature, which may be asserted against or incurred by any of them as a result of (1) my participation in the Competition or (2) any act, failure to act, or neglect (a) by me, my agents, employees, riders, handlers, trainers, coaches, drivers, contractors or invitees, or (b) by any animal owned or exhibited by me or in my custody or control.

I AGREE to accept AS FINAL any decision of AHA, the Show Commission or Show Officials concerning my qualification or the qualification of my horse to enter the Competition or any results of the Competition, except to the extent that the Rules of AHA, the Competition, Equestrian Canada or U.S. Equestrian Federation permit a protest or hearing of such decisions. Should a hearing be requested, **I agree to accept AS FINAL** the decision of the particular hearing body. **I agree to release, hold harmless and not to sue** AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Show Commission, Show Officials or any hearing body that relates to my qualifications or my horse(s)' qualifications to enter the Competition or any results of the Competition.

I AGREE that AHA has the sole right to control, sell, supervise or give away (or assign to others the right to do so) the exclusive rights to broadcast, televise, reproduce, transmit and disseminate all or part of this event, and I agree that AHA may use or assign, in any way AHA sees fit, photographs, films, videos, audios, cablecasts, or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition or AHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way which implies endorsement of any company, product, product category or service. 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.

I AGREE and represent that I am qualified and eligible to enter and/or participate in the Competition and every horse I am entering is qualified and eligible as entered.

I FUTHER AGREE that by participating in an Amateur class that I am in compliance with the USEF Amateur rule.

By signing below as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions, and further agree to assume all of the obligations of this AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child.

This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain in effect.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

Owner -** Mandatory	No Junior Signatures	Signature X
Trainer or Custodian of horse @ show - ** Mandatory	No Junior Signatures Adult Owner must sign if no trainer	Signature X
Rider 1 - ** Mandatory	No Junior Signatures	Signature X
Rider 2 - ** Mandatory	No Junior Signatures	Signature X
Rider 3 -** Mandatory	No Junior Signatures	Signature X

EQUINE ACTIVITY LIABILITY ACT WARNING:

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK.

Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.