

## FEE SCHEDULE

### Categories and Fees

**BBook II horses born after December 31, 2008 will not be accepted into inspections**

#### FOAL BOOK

- (1) Colts for Foal Book (included in reg. fee)
- (2) Fillies for Foal Book (included in reg. fee)
- (3) Yearling Mares for Premium @ \$95
- (4) 2 Yr. Mares for Premium @ \$95

#### STUDBOOK MARES

- (5) 4+ Yr Mares for Studbook & Star @ \$115
- (6) 3 yr Mares for Studbook & Star @ \$115
- (7) STB Mares Repeat Inspect for Star @ \$95
- (8) Premium Judging of Star Mares 4-6 @ \$95
- (9) Premium Judging for Star Mare 7+ @ \$95
- (10) Premium judging of Crown mares @ \$95
- (11) Premium judging of Model mares @ \$95

#### GELDINGS

- (12) 3+ Geld for Geld Std book & Star @\$115
- (13) Gelding Repeat Inspect for Star @\$95
- (14) Premium Judging for Star Gelding 4+ @\$95

#### STALLIONS

- (17) 3+ Stallions for studbook & Star @ \$115
- (18) Approved Studbook Stallions (mandatory) @ \$100

#### PERFORMANCE TEST

- (20) IBOP @ \$200.00 Please Specify IBOP Test A= Riding IBOP B= Driving  
**(No IBOPS will be accepted after August 1,2010)**

**Judges will select mares for Crown and Model along with Stallions for Central Proving out of the existing classes. Fees for Crown, Model and Central Proving will be paid before papers are issued.**

**Owners of horses to be inspected must have FHANA membership for the 2010-2011 membership year. Entries will not be processed unless FHANA memberships are current.**

*All cancellations will be assessed an office fee of \$75.00 per horse. The remainder of fees will be considered for refund with appropriate Vet/ Doctors medical documents*

#### Late Fees

- |  |                        |
|--|------------------------|
| Arrives at FHANA office after August 1,2010  | Add \$50.00 per horse  |
| Arrives at FHANA office after August 15,2010 | Add \$300.00 per horse |

**Sites may impose additional fees. Please check with Site host for additional fees**



**DEADLINE: August 1, 2010**

**2010 Inspection Application**

Mail form and payment (US \$) to:

**FHANA, 4037 Iron Works Parkway, Suite 160**

**Lexington, KY 40511-8483**

Entries received in the FHANA office after this date will not be in the catalog

|                                |                    |                                       |                          |                         |                         |                       |  |
|--------------------------------|--------------------|---------------------------------------|--------------------------|-------------------------|-------------------------|-----------------------|--|
| <b>INSPECTION SITE:</b>        |                    | <b>Owner Name/ FHANA Membership #</b> |                          |                         | <b>Owner's Address:</b> |                       |  |
| <b>Inspection Date:</b>        |                    | <b>Breeder's Name</b>                 |                          |                         | <b>Phone:</b>           |                       |  |
|                                |                    |                                       |                          |                         | <b>E-mail:</b>          |                       |  |
| <b>Horse Name &amp; Reg. #</b> | <b>Sex (S\M\G)</b> | <b>Birth Date</b>                     | <b>Sire &amp; Reg. #</b> | <b>Dam &amp; Reg. #</b> | <b>Class (1-20)</b>     | <b>Inspection Fee</b> |  |
|                                |                    |                                       |                          |                         |                         |                       |  |
|                                |                    |                                       |                          |                         |                         |                       |  |
|                                |                    |                                       |                          |                         |                         |                       |  |
|                                |                    |                                       |                          |                         |                         |                       |  |
|                                |                    |                                       |                          |                         |                         |                       |  |
|                                |                    |                                       |                          |                         |                         |                       |  |

\_\_\_\_ Check or Money Order in US Funds (*Payable to Friesian Horse Association of North America or FHANA*)

\_\_\_\_ Please charge my credit card:  Discover  MasterCard  Visa

Name on Card: \_\_\_\_\_

Billing Address for Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

CVV2: \_\_\_\_\_ **Payment must be included to complete entry**

*(this is the 3 digit number on the back of MasterCard, Visa and Discover card)*

Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

|                             |  |
|-----------------------------|--|
| <b>Total of class fee's</b> |  |
|                             |  |
| <b>Late Fees</b>            |  |
|                             |  |
| <b>Total</b>                |  |

**\*Please contact Site host to reserve runners and for cost**



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***THE FOLLOWING LIABILITY AND DRUG TESTING WIAVER MUST BE SIGNED TO COMPLETE THIS ENTRY FOR ACCEPTANCE.***

**Friesian Horse Association of North American (FHANA) 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 FHANA Keuring/Inspection show,(hereinafter referred to as the Event) to the following:

I AGREE that I choose to participate voluntarily in this Event with my horse(s), as an owner, lessee, agent, rider, runner, trainer or as a parent or guardian of a minor voluntarily and with my permission participating and/or attending this event. I am fully aware and acknowledge that any event involving horses, and specifically this Event, involve inherent dangerous risks of accident, loss, both personal and property, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering and/or death (hereinafter referred to as Harm).

I AGREE to release FHANA, the Event and the Host of said Event, from all claims for money damages or otherwise for any harm to me, my ward, or my horse(s) and for any harm caused by me, my ward or my horse(s) to others, even if the harm resulted, directly or indirectly, from the negligence of FHANA, the Event or the Host.

I AGREE to expressly assume all risks of harm to me, my ward or my horse(s), including harm resulting from the negligence of FHANA, the Event or the Host.

I AGREE to indemnify (that is to pay any losses, damages, or costs incurred by) FHANA, the Event and/or the Host and to hold them harmless with respect to claims for harm to me, my ward or my horse(s), and for claims made by others for any Harm caused by me, my ward or my horse(s) at the Event or while my horse(s) are stabled at the Host location.

If I am a parent or guardian of a minor participating or attending the Event, I consent to the minor's participation and/or attendance and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Agreement on the minor's behalf.

I AGREE that FHANA, the Event and the Host as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations involved in this Event.

I further REPRESENT that I have the requisite training, horsemanship skills and abilities to safely participate in this Event.

Furthermore sites will be randomly chosen for drug testing. FHANA will acquire a Veterinarian to randomly sample Champion or Reserve Champions at the undisclosed site. A FHANA representative will be available to supervise the test and randomly draw the horses to be tested. The veterinarian will draw a blood sample from the randomly chosen horses. The sample will then be shipped to the USEF laboratory to be tested.

By signing this form you are also authorizing FHANA and the appointed Veterinarian to draw blood from your horse/s to be sampled by the USEF Laboratories. The sample will only be taken from your horse if they are awarded Champion or Reserve Champion in their respective classes. If you refuse to sign this form you will not be allowed to participate in the Keuring/event. No refunds will be issued. The results from the blood sample will be available in approximately 4-6 weeks after the final Kueuring/inspection. You will be notified by a Keuring Committee representative of the results of your sample.

The KFPS does not allow horses from foreign associations to be inspected and re-inspected in the same year.

BY SIGNING BELOW, I AGREE to be bound by all the terms and conditions set forth above

**Owner/Agent**

**Handler**

**Signature** \_\_\_\_\_

**Signature** \_\_\_\_\_

**PrintName** \_\_\_\_\_

**PrintName** \_\_\_\_\_