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Owner Name	OWNER me						Rider Name						Trainer Name	Trainer Name					•
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Name of	CIPIENT	OF PRIZ		Y AWARDS		Addre	ess						HITS	s, 319 N	Iain Street	CDFA Drug F	ee: \$5	HUNGES	ANNIVE.
Individual		Co	orporation			City				St	Zip		Saug	gerties, 1	NY 12477	USEF Drug: USEF Fee:	\$15 \$8		
SS#		<b>OF</b>	R ed ID#			Cell				Circle One	Jr A	Am Pro	845.246.8833 CANADIAN EXHIBITORS			USHJA Fee: PCHA Fee:	\$7 \$3	STABLE	: WITH:
Address			Emai	Email						CHECK MUST BE PRE-PRINTED "U.S. FUNDS"			USEF SP: USHJA SP:	\$45 \$30					
City/St/Zip						EC#				USEF # USHJA #					ed to order Tack				
OFFICE USE ONLY			HOR	SE NAME			USEF	HORSE #		USHJA #	RIDE		J See Irai	ners bar	n Account" und		ASSES	lules and Reg	3 IOF HOW to .
	COLOR	SEX	нт.	YEAR OF BIRTH	HORSE/PONY SM MD LG	Check box if horse is NON- SHOWING	EC HORSE #		RIDER TWO					RIDER 1	TWO CLASSES				
										Y AGREE					lls, RV's Paddocl	ks & Horse Dep	osit are No	n Refundable a	fter Jan 2, 2019
I have read the USEF Ent Rules, the Prize List, and I	ry Agreeme ocal rules o	Fed	deratio	on Releas	se, Ass	umption	of Risk	r, Waive	r and li	and agree that by ions against the F Indemnific Indemosique before sign	ation	Competition, I am si t be brought in New	ubject to Federa v York State.	MΕ	Horse Deposit Horse Non-Show Jumper Nominat Weekly Tent Sta	ving S ion S	\$ 25 x_ \$ 200 x_ \$ 250 x_	= \$ _	
I AGREE in consideration for my participation in this Competition HITS Desert Circuit to the followin I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Co Management, as well as all of their officials, officers, directors, employees, agents, personnel, v and Federation affiliates.  I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, dr dler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior e am fully aware and acknowledge that horse sports and the Competition involve inherent danger of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, or death. ("Harm").  I AGREE to hold harmless and release the Federation and the Competition from all claims for damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused my horse to others, even if the Harm arises or results resulted, directly or indirectly, from the not the Federation or the Competition.  I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting negligence of the Federation or the Competition.  I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federatio Competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition and to hold them harmless with respect to claims for Harm to me or my horse, and the competition includes the Licensee and Competition includes the Licensee and Competition includes the Licensee and Competition includes the claims of the competition includes th							Index read the Federation Rules about protective equipment, including GR801 and if ap EV114, and I understand that I am entitled to wear protective equipment without penalty, and I added that the Federation strongly encourages me to do so while WARNING that no protective equipment without penalty, and I added that the Federation strongly encourages me to do so while WARNING that no protective expressions and against all injuries. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGR of the above provisions and AGREE to assume all of the obligations of this Release on the child's present that I have the requisite training, coaching and abilities to safely compete in this correct I AGREE that if I am injured on the show grounds prior to, during or after competition, the medical USEF accident/injury report form.  BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules, PCHA Rules terms and provisions of this entry blank and all terms and provisions of this prize list. If I am sign submitting this Agreement electronically, I acknowledge that my electronic signature shall have the validity, force and effect as if I affixed my signature by my own hand.						and if applical alty, and I acknotoctive equipm and AGREE to a the child's beh in this competiting, the medical prederation on CHA Rules and If I am signing a	ble, owl- ent o all lalf. ion. lall and land land land land land land	Weekly Tent Stat Weekly Permand Weekly Ship-In/0 Weekly RV Weekly Paddock Weekly VIP Clut Weekly Wilmington Winter Tour Pen CIRCUIT ITEMS Circuit Tent Stal Circuit Permane Circuit Permane Circuit Permane Circuit VIP Club Circuit VIP Club Circuit Wilmingtor Total Amount E Office fee of \$85	ent Stall Grounds Fee	\$ 500	= \$ _ = \$ _ = \$ _ = \$ _ = \$ _ = \$ _ = \$ _ = \$ _ = \$ _ = \$ _ Orde	k Quantity ircuit Items red on DC I try Blank
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