ENTRY DEADLINE: MONDAY MARCH 11 2010

-		 -10	
-	W		11.

HITS COACHELLA CI		Onivi: Marcii	17, 2019			LINE. I	MONDA	I, MAKCI	1 11, 2019		G MILLION	\5/
Owner Name	OWNER		RIDER ONE			Trainer Name		TRAINER				
Address			Address					Farm Name				
Address			City		St	Zip		Address				
City	St Z	ïp	Cell		Circle One	Jr Am	ı Pro	City		St	Zip	
Cell			Email					Cell				
Email			EC#		USEF#			Email				
EC#	USEF#			RIDE	USHJA #			EC#	Γ] USEF#		П
	USHJA #		Rider Name			PAY	ABLE TO	USHJA# MISC. FEES	1100050 400			
	PRIZE MONEY AWARD	<u>s</u>	Address				9 Main Street	CDFA Drug Fee: \$5	HORSES ARR	RIVE:		
Name of OR Individual Corporation		City		St Zip			Saugerties, NY 12477		USEF Drug: \$15 USEF Fee: \$8			
OR SS# Fed ID #		Cell		Circle One	Circle One Ir Am Pro			246.8833 N EYHIRITORS	USHJA Fee: \$7 PCHA Fee: \$3	STABLE WIT	ГН:	
Address		- Email					CANADIAN EXHIBITORS CHECK MUST BE PRE-PRINTED "U.S. FUNDS"		USEF SP: \$45 USHJA SP: \$30			
City/St/Zip			EC#		USEF#						┃ /s, feed/shavings, or do	lo splits?
					USHJA #			See "Trainer's	Barn Account" unde		n Rules and Regs for "	"how to".
OFFICE USE ONLY	HORSE NAME		USEF HORSE #	RIDER ONE		RIDERS	S		RIDER ONE CLASSES	CLASSES		
			GOET FIGURE #	1								
									620. <i>A</i>	AIG \$1	Million	
COLOR SE)	(HT. YEAR OF BIF	lif hore		☐ RIDER TWO								
		SM MD NON- LG SHOW	/ING_						G	rand P	IIX	
		USEF E	NTRY AGREEMEN	7								
I have read the USEF Entry Agreement (G Rules, the Prize List, and local rules of the	competition. I agree to waive Federation Rela	the right to the use of my p	and agree to all of its provisions shotos at the competition, and agr tion of Risk, Waiv legal rights. Read i	ree that any action The and In	ons against the Fe Indemnifica	deration must be ation	npetition, I am sub e brought in New \	bject to Federation York State.		Al	G	
I AGREE in consideration for my participation in this Competition HITS Desert Circuit 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 officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates. I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, han-			made by others for any Harm caused by me or my horse while on the show grounds prior to, during or after 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					\$1 MILLION GRAND PRIX				
dler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous ris			- 2-1- vari guaru against air injunos.			Fees Due with this Entry Form:						
of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering			Is risks If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to a ferning, of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf			and AGREE to all the child's behalf.	(Please use Week VIII Entry Blank to order Horse Stall.)					
or death. ("Harm"). I AGREE to hold harmless and release the Federation and the Competition from all claims for money			r money I represent that I have	I represent that I have the requisite training, coaching and abilities to safely compete in this competition.			AIG Million Entr	y Fee \$ 3,500	x1 = \$	3,500		
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 resulted, directly or indirectly, from the negligence						Federation on the	USEF/PCHA/CI	DFA Fee \$ 38	x1 = \$	38		
of the Federation or the Competition.			official USEF accident/injury report form.			Sub Total			3,538			
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.			terms and provisions of this entry blank and all terms and provisions of this prize list. If I am signing and				Club Table \$4,000	x = \$				
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.							Total Amount I	Enclosed	= \$			
·	<u>'</u>		•	ect as ii i allixed	illy signature by				Office fee of \$85 p	per horse charged at the	show. See Rules & Regi	julations.
OWNER/AC	ENT	RIDE	ER/HANDLER	Is Rider a		TRAII	NER		М М			
SIGNATURE:		SIGNATURE:		U.S. Citizen: YES O	SIGNATURE: _							
Print Name:		Print Name:		NO O	Print Name:				OFFICE			
(Required if Rider/Handler is a minor) PARENT/GUARDIAN SIG.:		SIGNATURE:		U.S. Citizen:	COACH SIGNAT	URE:			6			
Print Name:		Print Name:			Print Name: Emerg. Contact	Phone#						