

OWNER	RIDER ONE	TRAINER
Owner Name	Rider Name	Trainer Name
Address	Address	Farm Name
Address	City St Zip	Address
City St Zip	Cell Circle One Jr Am Pro	City St Zip
Cell	Email	Cell
Email	EC # <input type="checkbox"/> USEF # <input type="checkbox"/> USHJA # <input type="checkbox"/>	Email
EC # <input type="checkbox"/> USEF # <input type="checkbox"/> USHJA # <input type="checkbox"/>	RIDER TWO	
	Rider Name	EC # <input type="checkbox"/> USEF # <input type="checkbox"/> USHJA # <input type="checkbox"/>

RECIPIENT OF PRIZE MONEY AWARDS	PAYABLE TO	MISC. FEES	HORSES ARRIVE:
Name of Individual OR Corporation	HITS, 319 Main Street Saugerties, NY 12477 845.246.8833	USEF Drug: \$15	STABLE WITH:
SS# - - - - - OR Fed ID # - - - - -		USEF Fee: \$8	
Address	CANADIAN EXHIBITORS CHECK MUST BE PRE-PRINTED "U.S. FUNDS"	USHJA Fee: \$7	
City/St/Zip		USEF SP: \$45	
		USHJA SP: \$30	
TRAINERS – Need to order Tack Stalls, Paddocks, RVs, feed/shavings, or do splits? See "Trainer's Barn Account" under Entry Procedures in Rules and Regs for "how to".			

OFFICE USE ONLY	HORSE NAME	USEF HORSE #	RIDERS	CLASSES
		USEF HORSE # <input type="checkbox"/> RIDER ONE		RIDER ONE CLASSES
	COLOR SEX HT. YEAR OF BIRTH HORSE/PONY SM MD LG	EC HORSE # <input type="checkbox"/> RIDER TWO		RIDER TWO CLASSES
	Check box if horse is NON-SHOWING <input type="checkbox"/>			

USEF ENTRY AGREEMENT		WEEKLY FEES
I have read the USEF Entry Agreement (GR 906.4) as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos from the competition, and agree that any actions against the Federation must be brought in New York State.		Stalls, RV's Paddocks & Horse Deposit are Non Refundable after Sept. 4, 2019 Horse Deposit \$50 x _____ = \$ _____ Jumper Nomination \$175 x _____ = \$ _____ Weekly Stall - Permanent \$250 x _____ = \$ _____ Ship-in / Grounds Fee (per week) \$50 x _____ = \$ _____ Paddock \$250 x _____ = \$ _____ RV Hookup \$275 x _____ = \$ _____
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 Competition HITS Culpeper Series 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, handler, vaulter, 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 resulted, 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 on the showgrounds 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 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 on the showgrounds prior to, during or after 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.	Total Amount Enclosed \$ _____ Office Fee of \$25 per horse will be billed at the show.

OWNER/AGENT	RIDER/HANDLER	TRAINER	OFFICE USE
SIGNATURE: _____ Print Name: _____	SIGNATURE: _____ Print Name: _____	Is Rider a U.S. Citizen: YES <input type="radio"/> NO <input type="radio"/> SIGNATURE: _____ Print Name: _____	
(Required if Rider/Handler is a minor) PARENT/GUARDIAN SIG.: _____ Print Name: _____	SIGNATURE: _____ Print Name: _____	Is Rider a U.S. Citizen: YES <input type="radio"/> NO <input type="radio"/> COACH SIGNATURE: (if applicable) _____ Print Name: _____ Emerg. Contact Phone# _____	