

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	
Email			Email				Email			
Cell			EC #		<input type="checkbox"/>	USEF #	<input type="checkbox"/>	Cell		
EC #			<input type="checkbox"/>	USEF #	<input type="checkbox"/>	USEF #		<input type="checkbox"/>	USEF #	
			USHJA #		<input type="checkbox"/>	USHJA #		<input type="checkbox"/>		
RECIPIENT OF PRIZE MONEY AWARDS			RIDER TWO				PAYABLE TO		MISC. FEES	
Name of Individual			Rider Name				HITS, 319 Main Street Saugerties, NY 12477 845.246.8833		USEF Drug: \$15 USEF Fee: \$8 USHJA Fee: \$7 USEF Show Pass: \$45 USHJA Show Pass: \$30 Horse Watch: \$15	
OR Corporation			Address							
SS#			City		St	Zip	CANADIAN EXHIBITORS CHECK MUST BE PRE-PRINTED "U.S. FUNDS"		HORSES ARRIVE: STABLE WITH:	
OR Fed ID #			Cell		Circle One	Jr				
Address			Email				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".			
City/St/Zip			EC #		<input type="checkbox"/>	USEF #			<input type="checkbox"/>	
			USHJA #		<input type="checkbox"/>	USHJA #				

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	Check box if horse is NON-SHOWING <input type="checkbox"/>	EC HORSE #	<input type="checkbox"/>	RIDER TWO				RIDER TWO CLASSES	
					SM MD LG									

USEF ENTRY AGREEMENT

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 at the competition, and agree that any actions against the Federation must be brought in New York State.

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 Saugerties 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.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and all terms and provisions of this prize list. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

Stalls, RV's Paddocks & Horse Deposit are Non Refundable after June 26, 2019

WEEKLY FEES			= \$
	Horse Deposit	\$ 50	
Jumper Nomination	\$200	x _____	
Weekly Stall	\$250	x _____	
Weekly Stall Late	\$275	x _____	
Permanent Stall Silver	\$300	x _____	
Permanent Stall Silver Late	\$325	x _____	
Permanent Stall Gold	\$375	x _____	
Permanent Stall Gold Late	\$400	x _____	
Paddock	\$250	x _____	
RV Hookup	\$300	x _____	
Legend Club Table	\$2,000	x _____	
Circuit Items - Weeks IV through VI			
Circuit Stall Tent	\$700	x _____	
Circuit Stall Silver	\$800	x _____	
Circuit Stall Gold	\$1,000	x _____	
Circuit RV Hookup	\$850	x _____	
Total Amount Enclosed			\$ _____

Office Fee of \$50 and Horse Watch Service Fee of \$15 per horse will be billed at the show

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

OFFICE USE