FEBRUARY 21-23, 2020

Name of Horse	USEF / ID #	Color	Sex	Height	Age	Green Year		Circle Size		
						1^{st}	2^{nd}	Sm Me	ed Lg	
Rider	Age	USEF#	ASP	CA#		Classes				
#1	. go	<u> </u>								
Rider	Age	USEF#	ASP	CA#		Clas	sses			
#2	7.90		7.01							
	l l									
Federation Palease As	ssumption of Risk, Waiver		F Entry Agre		nnortant legal ric	thte Poad it car	efully before si	anina		
I have read the United States Equestrian Fede	ration, INC (the federation)	Entry Agreement	t (GR906.4) a	as printed in the	Prize List for thi	s Competition a	nd agree to all	of its provis	sions. I	
understand and agree that by entering this Co										
the Competition, and agree that any actions a the following: I Agree that "the Federation" and "Cor	gainst the Federation mus	t be brought in Ne	w York Stat	e. I AGREE in cor	sideration for my p	articipation in this	Competition - Old	d Salem Farm	Horse Shows to	
the following: TAgree that the Federation and Cor officials, officers, directors, employees, property own										
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	n involve inherent	dangerous risks	of accident, lo	ss, and serious	
bodily injury including broken bones, head injuries, to	auma, pain, suffering, or deatl	h.("Harm")I AGREE	to hold harmle	ess and release the	e Federation and th	ne Competition fro	m all claims for m	noney damage	es or otherwise f	
any Harm to me or my horse and for any Harm of an										
AGREE to expressly assume all risks of Harm to me incurred by) the Federation and the Competition and										
Competition.I have read the Federation Rules about	protective equipment, including	g GR801 and if appl	licable EV114	and I understand	that I am entitled to	o wear protective	equipment withou	it penalty, and	ll acknowledge	
the Federation strongly encourages me to do so whi	e WARNING that no protective	e equipment can qua	ard all of the o	bligation of this Re	elease on the child'	s behalf.I AGREE	that "the Federat	tion" and "Con	npetition" as use	
above includes all of their officials, officers, directors	, employees, property owners,	agents, personnel,	volunteers an	d affiliated organiz	ations.I					
represent that I have the requisite training, coaching my injury and treatment to the Federation on the office	and abilities to safely compete	e in this competition.	I AGREE that	if I am injured at t	his competition, the	e medical personn	el treating my inju	uries may prov	ide information	
all terms and provisions of this Prize List. If I am sign										
my own hand. BOD 1/23/11 Effective 12/1/11		none olocaronically, i	acialomicago	that my diodironic	o organicaro orican ric			ot do ii i dinke	a my dignataro	
	Owner/Agent (mandator	y)	Trainer (mandatory)			Coach (if applicat		ole)		
Signature	Signature		Signature			Signature		<u>-</u>		
Print Name:	Owner/Agent (mandatory) Signature Print Name: /driver/handler is a minor) FMFR		Print N	Signature Print Name:			Signature Print Name:			
Parent/Guardian Signature (Required if rider	/driver/handler is a minor)									
Print Parent/Guardian Name:		EM		CONTACT PHO	NE NUMBER					
Print Parent/Guardian Name: Is Rider/Driver/Vaulter a U.S. Citizen:	yesno	EMA	IL ADDRES	S						
Owner	Rider	#1		Т	rainer	Tota	Fees:			
Name	Name		Name				ration Fee			
Address	Address		Addre	ess		Drug	s & Medication	Fee @ \$23	\$ <u>23.00</u> .	
						USE	F Show Pass Fe	ee @ \$45		
Phone #	Phone #		Phone	e #						
USEF# Taxpayer Information (for Prize Money)	USEF#	Rider #2		USEF#		USH	USHJA Show Pass Fee @ \$30 _			
Taxpayer information (for Frize Money)	Nidel	#2		CHECKS I	PAYABLE TO:	USH	JA Zone Suppor	rt Fee @ \$7		
Name	Name									
Address			_		LEM FARM	Stall	Fee @\$225	-		
Auuress	Address				BOX 317	Offic	e Fee @ \$45		\$45.00	
					LEM, NY 10560		•			
Phone #	LICEE #				4-669-5610					
	USEF #			tax: 91	4-669-8532	TOT	AL DEEC			
SS #	SignatureX					101	AL FEES			