

#	Name of Horse	USEF/USHJA #	Sex	Color	Age	Height	SHOW DATE:
Name of Rider	Age	USEF/USHJA #	DIVISION NAME		CLASS NUMBERS		
Name of Rider	Age	USEF/USHJA #	DIVISION NAME		CLASS NUMBERS		

OWNER		RIDER		TRAINER		Entry Fees: _____ _____ _____ _____ _____	
Owner: _____	Address: _____	Phone #: _____	USEF/USHJA #: _____	EMAIL: _____			
Rider: _____	Address: _____	Phone #: _____	USEF/USHJA #: _____	EMAIL: _____			
Trainer: _____	Address: _____	Phone #: _____	USEF/USHJA #: _____	EMAIL: _____			

By entering this Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the rules, regulations and procedures of the Competition and all Associations associated with this Competition. I agree to be bound by these rules, regulations and procedures. I will accept as final the decision of the Show Committee on any question arising under the rules, regulations and procedures, and agree to release and hold harmless the Competition, their officials, director and employees for any action taken under the rules, regulations and procedures. I represent that I am eligible to enter and/or participate under the rules regulations and procedures, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Competition may use or assign photographs, videos, audios, cable-casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. Release, Assumption of Risk, Waiver, and Indemnification. This document waives important legal rights. Read it carefully before signing. I AGREE that in consideration for my participation in the Competition to the following: I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaultor, loungeur, 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 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 directly or indirectly, from the negligence of the Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Competition and to hold them harmless with respect to claims for Harm to me or my horses, and for claims made by others for any Harm caused by me or my horse while at the Competition. I have read the rules, regulations and procedures about protective equipment, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Competition 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. BY SIGNING BELOW, I AGREE to be bound by all applicable rules, regulations and procedures and all terms and provisions of this entry blank. I further agree that I am subject to the Equine Liability Laws of the state in which I am competing, and agree to be in compliance with all local, state and federal rules, regulations and laws governing my participation in equestrian activities.

UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES, PURSUANT TO P.L. 1997, C.287,C:5:15-1 ET SEQ.

A PARTICIPANT SHALL SUBMIT A WRITTEN REPORT TO THE OPERATOR SETTING FORTH THE DETAILS OF ANY ACCIDENT OR INCIDENT AS SOON AS POSSIBLE, BUT IN NO EVENT LONGER THAN 180 DAYS FROM THE TIME OF THE ACCIDENT OR INCIDENT.

Medic/Grounds	\$ 10.00
Total Due	_____
Meas. Card	_____
Credentials:	_____
Cogg: _____	
O _____	
R _____	
T _____	
H _____	

OWNER or AGENT (mandatory): _____ RIDER (mandatory): _____ TRAINER (mandatory): _____ COACH (if applicable): _____

Signature: _____ Signature: _____ Signature: _____ Signature: _____

Print Name: _____ Print Name: _____ Print Name: _____ Print Name: _____

Parent/Guardian Signature (required if rider/handler is a minor): _____ Print Name: _____ Payment _____

Amount: _____

EMERGENCY CONTACT INFORMATION: Name: _____ phone: _____