

Competition Name _____ Competition Date _____

Official Use Only
Bridle No.

Name of Horse		Previous Name of Horse (if any)		Breed Registry Initials	Sex
Height	Color	Coggins Date	Sire	Dam	
Dam's Sire		Country of Birth		Year of Birth	Groom
Horse	Rider / Handler	Owner / Lessee	Trainer*	Coach	
USEF #	USEF #	USEF #	USEF #	USEF #	
USDF #	USDF #	USDF #	USDF #	USDF #	
Local #	Local #	Local #	Please enclose copies of all membership cards, and registrations.		

*Trainer: the person responsible for the horse during the show, must be 18 years of age or older and must be on the show grounds during the show.

Class No.	Division	Class Description	Fees

Owner / Lessee _____ Address _____ City/State/Zip _____ Day Phone _____ Night Phone _____ Email _____	Subtotal Class Fees	
	USEF Horse Fees: (\$5 USEF Fee + \$7 D/M Fee = \$12)	12.00
	Discipline Fee: Add If Card Does Not State Dressage \$5 - Senior Only, Junior Exempt	
	USEF Non-Member Fees (Jr \$20, No Discipline Fee; Sr \$20 + \$5 Discipline Fee)	
	USDF Non-Member Fee - \$20	
Rider / Handler _____ Address _____ City/State/Zip _____ Day Phone _____ Night Phone _____ Email _____ Rider Citizenship (if not USA) _____ Jr / Young Rider Birthday _____	OFFICE FEE	
	30.00	
	Stabling Fees: _____ Stalls @ \$ _____ / Stall	
	Tack Stall: _____ Stalls @ \$ _____ / Stall	
	Day Stall: _____ Stalls @ \$ _____ / Stall	
	Trailer-In Fee: _____ Days @ \$ _____ / Day	
	LATE FEE	
Division (circle one) JR YR AA Open	Fax/Credit Card Fee \$10 (TDC Only)	
	Shavings: _____ @ \$9 Per Bale (TDC and ADA Flagstaff Shows Only)	
	2008 AZ State Championship Annual Horse Nomination Fee \$25. Pay once per year for scores to count. Make separate check payable to TDC.	
	TOTAL FEES	
Trainer _____ Address _____ City/State/Zip _____ Day Phone _____ Night Phone _____ Email _____	OFFICIAL USE ONLY CHECK #	
	BALANCE DUE	
	PLEASE FILL OUT BOTH SIDES OF THIS FORM. See other side for stabling requests.	

Stabling Information & Special Requests: Please list only ONE name (either individual or barn) for entire group (so we can get everyone together).

	Tue	Wed	Thu	Fri	Sat	Sun	Mon
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Special Request: _____

I hereby agree to release, indemnify and hold harmless USDF, its instructors, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with, participation in this competition or related activities. I also hereby agree to release, indemnify and hold harmless the competition management, show committee and members, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with, participation in this competition or related activities.

United States Equestrian Federation, Inc. Entry Agreement

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR1502.4) 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 [*insert name*] to the following:

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 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 caused by me or my horse to others, even if the Harm 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 at the Competition.

I have read the Federation Rules about protective equipment, including GR318 and EV113, 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 AGREE that the "Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

I AGREE that if I am injured at this 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. *BOD 1/16/05 Effective 12/1/05*

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 Federation Rules and all terms and provisions of this entry blank.

Rider / Driver / Handler / Vaulter / Longeur Signature (Mandatory)	Trainer Signature (Mandatory)	Owner / Lessee / Agent Signature (Mandatory)	Coach Signature (If Applicable)
Print Name	Print Name	Print Name	Print Name

Parent / Guardian Signature Required if Rider / Driver / Handler / Vaulter / Longeur is under 18.	Print Parent / Guardian Name

Rider / Driver / Handler / Longeur / Emergency Contact Information. Enter name of contact and relationship:	Phone Numbers (with Area Code)
Emergency Contact Information for Stable Watch. Enter name of contact and relationship:	Phone Numbers (with Area Code)

FILL OUT ONLY IF THE COMPETITION YOU ENTER ON THIS ENTRY FORM OFFERS CERTAIN USE OF CHARGE CARDS
(Check specification in prize list)

VISA MasterCard Card # _____ Exp. Date: _____

Card Holder Name: _____ Zip code as it appears on billing statement: _____