

SEHA

Entries Close 5PM Thursday Prior to Show

Date: _____



One Entry per Horse email: _____ @ _____

Enter On Line at www.horseshowing.com

Name of Horse	USEF#	Color	Sex	Height	Age	Pony/Jr. Hunter	Measurement Card #	Trainer or Barn Name

Rider #1 Name:	DOB:	USEF#	MHC#	CLASSES ENTERED	Class#							
Address:	Tel:		ASPCA#		NEHC#	Entry Fees						
Rider #2 Name:	DOB:	USEF#	MHC#		Class#							
Address:	Tel:		ASPCA#		NEHC#	Entry Fees						

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) 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.

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 to the following:

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 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, 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 at 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 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.

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.

RIDER/DRIVER/HANDLER/	OWNER/AGENT	TRAINER	COACH
Vaulter/Longeur (mandatory)	(mandatory)	(mandatory)	(if applicable)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____

Is Rider/Driver/Vaulter a U.S. Citizen: Yes No

There will be a \$50 service charge for any checks returned unpaid. All competitors must present their current USEF and NEHC membership cards or a copy thereof before a number can be given by the secretary.	
Entry Fees - Rider 1	
Entry Fees - Rider 2	
Warm Ups @ \$25 / \$30	
Office/EMT/# Fee/MHC	\$26
USEF Drug Fee	\$8
USEF Show Pass	
USEF Admin. Fee	\$8
USHJA Show Pass	
USHJA Zone Fee - - \$2	
Post-Entry Fee @ \$25	
Payment Rcv'd After Show \$100	
TOTAL	\$
Make checks payable to: SEHA	
Rider #1 - Cash	
Rider #1 - Check #	
Rider #2 - Cash	
Rider #2 - Check #	

entry or entries hereby made. I further agree that if any and therefore agree to indemnify and hold harmless