

**PAYMENT TO COVER
ALL FEES
MUST ACCOMPANY
ENTRIES
NO INITIAL BEDDING**

UPHA CHAPTER V HORSE SHOW

May 5 - 8, 2010

Entries close April 5, 2010

PLEASE PRINT OR TYPE (Fill out completely)
ONE ENTRY PER ENTRY FORM

**Make Checks payable and
mail to
UPHA Chapter 5 Horse Show**

Rider/Driver/Handler _____ USEF # _____ Association # _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____

Owner _____ USEF # _____ Association # _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____

Trainer _____ USEF # _____ Association # _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____

Make Checks payable to: _____ Social Security /Tax ID _____

Address _____ City/State/Zip _____

Office use	Horse Name			Registration #	USEF #
Color	Sex	Age		Height	
Class #					Total Fees
Entry Fee					

	TOTAL ENTRY FEES	\$
#	STALLS @ \$95 EACH	\$
#	LATE ENTRY STALLS @ \$120 each	\$
	GROUNDS FEE @ \$25 (showing but not using a stall)	\$
#	USEF DRUG FEE @ \$15 PER HORSE (\$7 Drug & Med/\$8 Horse)	\$
#	USEF NON-MEMBER FEE @ \$30	\$
	USEF AMATEUR FEE @ \$30	\$
#	RINGSIDE TABLE @ \$150 EACH (First come - First served)	\$
#	OFFICE FEE PER HORSE	\$ 15
#	CAMPER FEE @ \$15 PER DAY	
#	BAG SHAVINGS @ \$9 PER BAG	
#	HORSE SHOW SPONSORSHIP	\$
	TOTAL REMITTANCE	\$

I would like to donate my winnings to support the UPHA Chapter V Horse Show

Premium Checks not cashed within 90 days of issue will be voided and monies refunded to UPHA Chapter 5.

USEF ENTRY AGREEMENT ON THE BACK MUST BE SIGNED. Signed: YES NO

CHECK # _____ AMOUNT \$ _____ DATE RECEIVED _____ WE ALSO ACCEPT: VISA _____ MASTER CARD _____

CARD # _____ EXPIRATION DATE _____

CARD HOLDER NAME (please print) _____ CARD HOLDER SIGNATURE _____

* Post Entries will be accepted based on stabling availability - NOTE Late Stall Fee

WILL ARRIVE

ALL HORSES MUST HAVE NEGATIVE COGGINS TEST PERFORMED WITHIN 12 MONTHS OF SHOW, AND HEALTH PAPERS FOR ALL HORSES CURRENT WITHIN 30 DAYS

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, 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 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. *EC 9/21/09 Effective 12/1/09*

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	Owner/Agent	Trainer	Coach
Signature: _____	Signature: _____	Signature: _____	Signature: _____

Print Name: _____ (mandatory)	Print Name: _____ (mandatory)	Print Name: _____ (mandatory)	Print Name: _____ (if applicable)
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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