

Island Hills Stable Horse Show

ENTRIES CLOSE AT 48 HOURS PRIOR TO SHOW

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DATE: _____

NAME OF HORSE	USEF / ID#	COLOR	SEX	HEIGHT	AGE	GREEN YEAR	CIRCLE SIZE
RIDER	AGE	USEF #	ASPCA #	CLASSES			

FEDERATION 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, 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, Island Hills Stable Horse Show, to the following:
 I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management (Island Hills Stable Horse Show) as well as all of their officials, officers, directors, employees, agents, personnel, property owners, volunteers and Federation affiliates.
 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 a 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 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 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 "the Federation" and "Competition" as used above includes all of their officials, directors, employees, agents, personnel, volunteers and affiliated organizations.
 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.

Rider/Driver/Handler (Mandatory)
 Signature _____ Print Name _____
 Signature _____ Print Name _____
Owner/Agent (Mandatory)
 Signature _____ Print Name _____
 Signature _____ Print Name _____
Trainer (Mandatory)
 Signature _____ Print Name _____
 Signature _____ Print Name _____
Coach (if applicable)
 Signature _____ Print Name _____

Parent/Guardian Signature (Required if Rider/Driver/Handler is a minor) _____
 Print Parent/Guardian Name _____
 Print Parent/Driver/Vaulter a U.S. Citizen? Yes _____ No _____
 EMERGENCY CONTACT PHONE NUMBER _____

OWNER	RIDER #1	TRAINER	TOTAL FEES
Name _____ Address _____ Phone # _____ USEF # _____	Name _____ Address _____ Phone # _____ USEF # _____	Name _____ Address _____ Phone # _____ USEF # _____	Post Entry Fees @ \$10 per Class _____ USEF Fee @ \$8 _____ Drugs & Medication Fee @ \$8 _____ Zone Support Fee @ \$2 _____ USEF Non Member Fee @ \$30 _____ USHJA Non Member Fee @ \$30 _____ Stall Fee _____ B or C rated show _____ Day @ \$45 _____ Overnight @ \$70 _____ Number Fee @ \$1 _____ Office Fee @ \$20 _____ Schooling Fee @ \$20 _____ Scratch Fee @ \$25 _____ TOTAL FEES _____
Taxpayer Information (for Prize Money) Name _____ Address _____ Phone # _____ SS # _____	RIDER #2 Name _____ Address _____ USEF # _____ Signature _____	CHECKS PAYABLE TO: Island Hills Stable LLC c/o Daryl Jacobitti P.O. Box 494 Commack, NY 11725	