## OWNER

Owner Name
Address
Address
City St Zip
Phone Cell
E-mail
EC # ☐ PCHA # ☐ USEF # ☐ USHJA # ☐

## RIDER ONE

Rider Name B-day d/mm/yy
Address ASPCA #
Address
City St Zip
E-mail/Phone Cell
EC # ☐ PCHA # ☐ USEF # ☐ USHJA # ☐

## TRAINER

Trainer Name
Farm Name
Address
City St Zip
Phone Cell
E-mail
EC # ☐ PCHA # ☐ USEF # ☐ USHJA # ☐

## RIDER TWO

Rider Name B-day d/mm/yy
Address ASPCA #
Address
City St Zip
E-mail/Phone Cell
EC # ☐ PCHA # ☐ USEF # ☐ USHJA # ☐

## RECIPIENT OF PRIZE MONEY AWARDS

Name of Individual OR Corporation
SS# __ __ __ - __ __ - __ __ __ __ OR Fed ID # __ __ - __ __ __ __ __ __ __
Address
City/St/Zip

## PAYABLE TO

**HITS,** 319 Main Street
Saugerties, NY 12477
845.246.8833

**CANADIAN EXHIBITORS CHECK MUST BE PRE-PRINTED "U.S. FUNDS"**

## MISC. FEES

| | |
|---|---|
| CDFA Drug Fee: | $5 |
| USEF Drug: | $8 |
| USEF Fee: | $8 |
| USHJA Fee: | $2 |
| PCHA Fee: | $3 |
| USEF NM: | $30 |
| USHJA NM: | $30 |
| PCHA NM: | $10 |

HORSES ARRIVE:

STABLE WITH:

## OFFICE USE ONLY

| HORSE NAME | USEF HORSE # | RIDERS | CIRCLE | CLASSES |
|---|---|---|---|---|
| | | RIDER ONE | Jr / Am / Pro | RIDER 1 CLASSES |
| | EC HORSE # / FEI PASSPORT # | RIDER TWO | Jr / Am / Pro | RIDER 2 CLASSES |

| COLOR | SEX | HT. | AGE | GREEN | HORSE/PONY |
|---|---|---|---|---|---|
| | | | | 1 2 | SM MD LG |

I have read the USEF Entry Agreement (GR 906.4) 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 from 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 **HITS Desert Circuit** to the following:

**I AGREE** that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, 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 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 on the showgrounds prior to, during or after 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 on the showgrounds prior to, during or after 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.

## HORSE FEES

| | | | | |
|---|---|---|---|---|
| Horse Deposit | $ 75 | x ____ | = $ _____ | Weekly Horse Fees |
| Horse Non-Showing | $ 25 | x ____ | = $ _____ | |
| Jumper Nom | $ 150 | x ____ | = $ _____ | |
| Grand Prix Nom. (cl. 420) | $ 350 | x ____ | = $ _____ | |

## WEEKLY

| | | | | |
|---|---|---|---|---|
| Tent Stall | $ 200 | x ____ | = $ _____ | Weekly Stall Fees |
| Tent Stall - Late | $ 220 | x ____ | = $ _____ | |
| Permanent Stall | $ 400 | x ____ | = $ _____ | |
| RV | $ 250 | x ____ | = $ _____ | Weekly Misc. Fees |
| Paddock | $ 250 | x ____ | = $ _____ | |
| Oasis Club | $1,500 | x ____ | = $ _____ | |

**Total Amount Enclosed** = $ _____

**Order Circuit Items for Second Half Circuit on DC IV Entry Blank**

Office fee of $50 per horse charged at the show. See Rules & Regulations.

## MANDATORY

| OWNER/AGENT | RIDER/HANDLER | | TRAINER |
|---|---|---|---|
| SIGNATURE: _____ Print Name: | SIGNATURE: _____ Print Name: | Is Rider a U.S. Citizen: YES ❍ NO ❍ | SIGNATURE: _____ Print Name: |
| (Required if Rider/Handler is a minor) PARENT/GUARDIAN SIG.: _____ Print Name: | SIGNATURE: _____ Print Name: | Is Rider a U.S. Citizen: YES ❍ NO ❍ | COACH SIGNATURE: (if applicable) _____ Print Name: Emerg. Contact Phone# |

## OFFICE USE