



2017 CENTRAL FLORIDA HUNTER JUMPER NOVEMBER #3392

SHOW DATES: NOVEMBER 9-12, 2017
ONLY ONE HORSE PER ENTRY BLANK

CLOSING DATE: OCTOBER 30, 2017

ENTER ONLINE AT WWW.HORSESHOWSONLINE.COM
PLEASE PRINT OR TYPE CLEARLY - MAKE COPIES AS NEEDED

| Office Use Only | Name of Horse | | | | | USEF/USHJA# | Circle Types | Name of Rider(s) | Class or Division Numbers |
|-----------------|---------------|-----|--------|-----------|---------------------------------|--------------------|--------------|------------------|---------------------------|
| | | | | | | | Jumper | Rider One | |
| | Color | Sex | Height | Yr Foaled | Green | Horse/Pony | Hunter | | |
| | | | | | 1 st 2 nd | Small Medium Large | Equitation | Rider Two | |

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 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, 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.

Federation Entry Agreement GR906.4 - By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of the competition.

I agree to be bound by the Bylaws and Rules of the Federation and the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors, and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered.

I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right to publicity, or to misappropriation.

The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

Horse Recordings GR1102 - The Federation maintains the only official record of winnings of horses at all Regular Competitions. To keep these records consistent, a horse should be recorded with the Federation in the same name of horse and owner under which it exhibited at competitions. The Federation's horse recording records are not a title registry and the Federation does not decide, otherwise resolve, or become involved in ownership disputes.

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.

ALL SIGNATURES, ADDRESSES AND THE OWNERS SOCIAL SECURITY NUMBER MUST APPEAR ON THE ENTRY FORM IN ORDER FOR THIS ENTRY TO BE PROCESSED

Name of Person/Company Receiving Prize Money _____ SS#/FedID _____

Address: _____

| | |
|---|--|
| _____ Stalls @ \$185 after 10/30 \$200 | |
| USEF Federation Fee \$16 (S8 Drug and Med/S8 Administration) | |
| USEF Show Pass Fee \$30 Owner _____ Rider _____ Trainer _____ | |
| USHJA Show Pass Fee \$30 Owner _____ Rider _____ Trainer _____ | |
| USHJA Zone Fee \$7 | |
| CFHJA Membership Fee Optional \$40 | |
| Non Showing Horse Fee \$50 | |
| Service Fee \$50 | |
| Total | |

ENTER ONLINE AT WWW.HORSESHOWSONLINE.COM

Make Check Payable to and MAIL to CFHJA

SUSIE MORRISSEY

6111 95TH St. Cr E, Lakewood Ranch, FL 34202

(941) 527-6602 / efax (941) 827-3326

email horshesows.cfhja@aol.com

| | | | |
|--|--|---|---|
| X _____ Owner's Signature (mandatory) NAME _____ STREET _____ CITY _____ STATE _____ STATE _____ ZIP _____ TEL _____ USEF/USHJA# _____ OWNER'S EMAIL: _____ | X _____ First Rider's Signature (mandatory) NAME _____ STREET _____ CITY _____ STATE _____ ZIP _____ TEL _____ RIDER'S USEF/USHJA# _____ US Citizen yes ___ no ___ Date of Birth: _____ EMAIL: _____ X _____ Parent or Guardian Signature (required if rider is a minor) | X _____ Second Rider's Signature (mandatory) NAME _____ STREET _____ CITY _____ STATE _____ ZIP _____ TEL _____ RIDER'S USEF/USHJA# _____ US Citizen yes ___ no ___ Date of Birth: _____ EMAIL: _____ X _____ Parent or Guardian Signature (required if rider is a minor) | X _____ Trainer's Signature (mandatory) NAME _____ STREET _____ CITY _____ STATE _____ ZIP _____ TEL _____ USEF/USHJA# _____ TRAINER'S EMAIL: _____ X _____ Coach's Signature (if applicable) NAME _____ |
|--|--|---|---|

STABLE WITH: _____ EMERGENCY CONTACT: NAME & CELL PHONE _____