

Swan Lake Stables "B" Rated Shows 2011,2012
 381 Flatbush Rd., Littlestown, PA 17340
 717-359-5357
 Fax: 717-359-7793

Coggins Number _____

- Holiday Blast December 27, 2012 (317466) B-r-r B January 22,2011 (328654) Big B Classic February 4 & 5 (328768)
 SLS January 'B' January 14&15, 2012 (317053) SLS February 'B' February 18&19 2012(317055)
 Spring Jumper Classic March 10, 2012 (327230) March "B" Hunters March 11, 2012(317056)
 April B Hunters/Jumpers April 16, 2011 (317057) May B Hunters/Jumpers May 6, 2012 (324759)

Date Read _____

Ofc. Use	Name of Horse or Pony					USEF #	Riders	Circle	Classes
							Rider One	Jr Am Pro	Rider One Classes
	Color	Sex	Height	Age	Green 1 2	Horse/Pony SM MD LG	Rider Two	Jr Am Pro	Rider Two Classes
							Rider One	Trainer	

Federation Entry Agreement

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 _____ (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of 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, cable - casts, 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 of 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.

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 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, vaultor, 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.

Rider/Driver/Handler/Exhibitor Owner/Agent Trainer Coach
 Vaultor/Longeur (mandatory) (mandatory) (if applicable)
 Signature: _____ Signature: _____ Signature: _____ Signature: _____
 Print Name: _____ Print Name: _____ Print Name: _____ Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultor/Longeur is a minor)
 Print Parent/Guardian Name: _____ Emergency Contact Phone No. _____
 Is Rider/Driver/Vaultor a U.S. Citizen: ___ Yes ___ No

Print Name: _____
 Address: _____
 Phone: _____
 USEF # _____
 Birthdate _____
 E-Mail: _____

Rider Two

Print Name: _____
 Address: _____
 Phone: _____
 USEF # _____
 Birthdate _____
 E-Mail: _____

Owner/Agent

Print Name _____
 Address: _____
 Phone: _____
 USEF # _____
 E-Mail: _____

Circle: Junior Amateur Professional

Warning - In accordance with PA Act #93 of 2005 you assume the risk of Equine Activities Pursuant to Pennsylvania Law.

Print Name: _____
 Address: _____
 Phone: _____
 USEF # _____
 E-Mail: _____

Office Fee	\$25.00
USEF Drug Fee (Drug & Medication \$8; USEF \$7)	\$16.00
USEF/USHJA Non Member - \$30.00	
Post Entry - \$25.00	
Entries @	
Entries @	
Shavings @ \$8.00 per bag	
USHJA Zone Fee	\$2.00

TOTAL DUE _____

Social Security # _____
 No Money will be paid without a W-9 and Social Security #

Parent/Guardian (Required if Rider is a minor)

Signature: _____
 Print Name: _____

Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
USHJA: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USHJA: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USHJA: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USHJA: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>
USEF: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USEF: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USEF: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>	USEF: Card <input type="radio"/> Aff. <input type="radio"/> Join <input type="radio"/> N/M <input type="radio"/> AM <input type="radio"/>

Pre-Entries - Postmarked Monday Before The Show - Stall Dates on Back

Checks Payable to Swan Lake Stables - Pre Entries Are Not Considered On Time Without a Check

