

Mail Entries or Fax to: Swan Lake Stables  
 381 Flatbush Rd., Littlestown, PA 17340  
 Must Include Checks Payable to:  
 Swan Lake Stables  
 Copy of Check must accompany faxed entries

## Swan Lake Stables 2009 - 2010 B Entry Blank and Deadlines

- Dec. B (Dec. 30 - 31, 2009) 317466 HUNTERS ONLY  
 January B (January 16 - 17, 2010) 317053 HUNTERS ONLY  
 February B (February 20 - 21) 317055

Coggins Number _____
Date Read _____

ALL PRE ENTRIES DUE THE MONDAY Prior To The Show

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

Owner/Agent	Rider One	Rider Two	Trainer
Circle: Junior <input type="radio"/> Amateur <input type="radio"/> Professional <input type="radio"/>	Circle: Junior <input type="radio"/> Amateur <input type="radio"/> Professional <input type="radio"/>	Circle: Junior <input type="radio"/> Amateur <input type="radio"/> Professional <input type="radio"/>	Circle: Junior <input type="radio"/> Amateur <input type="radio"/> Professional <input type="radio"/>
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Address: _____	Address: _____	Address: _____	Address: _____
Phone: _____	Phone: _____	Phone: _____	Phone: _____
USEF #: _____	USEF #: _____	USEF #: _____	USEF #: _____
E-Mail: _____	Birthdate: _____	Birthdate: _____	E-Mail: _____
Social Security #: _____	E-Mail: _____	E-Mail: _____	Social Security #: _____

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

**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 Kick Off Classics to the following:

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 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 caused by me or my horse to others, even if the Harm 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 at the Competition. I have read the Federation Rules about protective equipment, including GR801 and 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 assume all of the obligations of this Release on the child's behalf. I AGREE that "the Federation" and "Competition" as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. 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. I represent that I have the requisite training, coaching and abilities to safely compete in this competition. BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry SS# \_\_\_\_\_

Night Watch - \$10 or \$4/nt. max \$10	
Office Fee	\$25.00
USEF Drug Fee <small>(Drug &amp; Medication \$8; USEF \$7)</small>	\$15.00
Entry Late \$25	
Main Barn Stalls - \$150 (\$85 per night)	
Hay Barn Stalls - \$120 (\$75 per night)	
Tent Stalls: NONE FOR THIS SHOW	
Shavings @ _____ @ \$8.00	
USEF Non Member Fee: \$30 <small><input type="checkbox"/> Owner <input type="checkbox"/> Rider <input type="checkbox"/> Trainer</small>	
USEF Non Member Fee: \$30 <small><input type="checkbox"/> Owner <input type="checkbox"/> Rider <input type="checkbox"/> Trainer</small>	
Zone Fee	\$2.00
<b>Just World Equestrian Help the Children</b> <small>This Fee is optional - www.justworldinternational.org</small>	\$2.00
Emergency Contact Phone #	

**Parent/Guardian (Required if Rider is a minor)**

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_

Owner/Agent (Mandatory)	Rider One (Mandatory)	Rider Two (Mandatory)	Trainer (Mandatory)
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"/>