

Swan Lake Holiday Blast December 27-31, 2017

Closing Date: Dec 20, 2017 Online Entries: <u>HorseShowsOnline.com</u> Mail To: Holiday Blast, 381 Flatbush Road, Littlestown, PA 17340

	Office Use On	ly
Date Rec'd:		
Coggins:		
EHV		

Name of Horse	Horse USEF	Age	Color	Sex	Breed	Height
Name of Rider One	Rider One USEF	Age	Classes Rider One			
Name of Rider Two	Rider Two USEF	Age	Classes I	Rider Two		
Prize Money Payee	Tax Id/Social Securi	y #	Mailing	Address fo	or Prize Money	7

Office Fee		\$35
USEF Drugs & Meds Fee		\$15
USEF Fee		\$8
USHJA Fee		\$7
USEF/USHJA Show Pass Fee		\$45/\$30
Post Entry Fee (after Nov 1)		\$35
Non-Showing Horse		\$45
Stall	@	\$150
Night Stall	@	\$100
Day Stall	@	\$80
Shavings		\$9.00
Hav	@	\$12.00
Grounds Fee	@	\$30
Camper - day/week	@	\$80/\$275

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 that any actions against the Federation must be brought in New York State. Release, Assumption of R isk, Waiver and I ndemnification This document waives import ant legal rights. Read it carefully before signing. I AGREE in consideration for my participate on in this 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 in the ormy damages or otherwise for any Harm to mer 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, from the negligence of the Federation and the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and to hold them harmless with respect to claims for Harm to mer or my horse, and for claims made by others for any Harm caused by me or my horse while at the Federation. 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 to the federation on the official USE accident/injury report form. BY SIGNING BELOW, I AGREE to be bound by all applicable Federation fulls of a junior exhibitor, I consent to the child's behalf. I represent that I have the requisite training, coaching and abilities to safely competition. I AGREE to be bound by all applicable Federation and AGREE to ab on while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior exhi

Owner (Mandatory)	Rider One (Mandatory)	U.S. Citizen: yes no	Rider Two	U.S. Citizen: yes no
Signature (parent if minor)	Signature (parent if minor)		Signature (parent if minor)	
Name	Name		Name	
Address	Address		Address	
City/State/Zip	City/State/Zip		City/State/Zip	
USEF #	USEF #		USEF #	
Email:	Email:		Email:	
Phone:	Phone:		Phone:	
Emergency	Emergency		Emergency	
Contact #:	Contact #:		Contact #:	

Trainer/Coach (Mandatory)			Credit Card Info				
Signature		USEF #		Name on Card			
Name		Email:		Card Number			
Address		Phone:		Billing Zip			
City/State/Zip		Stable:		Expiration		CID	