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Name of Horse		USEF/ID#		olor	Sex	Heigl	Height Age		Green Yr.		Circle Size		
									1st	2nd	Sm	Med	L
Rider #1		Age	USEF# ASPCA#		CA#	Clases							
Rider #2		Age	USEF#	ASP	CA#	Classes							
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petition, I am subject to Federation Rules, the Pri State Release, Assumption of Risk, Waiver and In: This document waives important legal rights REE in consideration for my participation in this C affiliated organizations. I AGREE that I choose to aware and acknowledge that horse sports and the harmless and release the Federation and the Cor sults, directly or indirectly, from the negligence of REE to indemnify (that is, to pay any losses, dam, n caused by me or my horse while at the Competi lity, and I acknowledge that the Federation stronglicipation and AGREE to all of the above provisions settion. I AGREE that if I am injured at this compe JW, I AGREE to be bound by all applicable Feder lectronic signature shall have the same validity, to	Inc. (the "Federation") Entry Agreeze List, and local rules of the com demnification. Head it carefully before signing competition to the following: I AGB participate voluntarily in the Competition from all claims for mone the Federation or the Competition from all claims for mone the Federation or the Competition ages, or costs incurred by) the Federation. I have read the Federation Fly encourages me to do so while to and AGBEE to assume all of the stition, the medical personnel treation rules and all terms and proprice and effect as if I affixed my significant in the same all terms and proprice and effect as if I affixed my significant in the second control of the second	ement (GR906) PEE that the " PEE th	6.4) as printed in ee to waive the ri et o waive the ri ny horse, as a rid; of accident, loss rotherwise for an expressly assument the Competition a rotective equipment in o protective ef this Release on es may provide in sentry blank and ny own hand.	the Prize List for the use of the competition and serious by Harm to me of the competition and to hold the child's beformation on mall terms and p	or this Comport my photos s used abov ler, vaulter, lodily injury in or my horse arm to me o m harmless R801 and, if guard agains inglif. I repress ny injury and orovisions of	etition and ag at the compe e includes all of ongeur, lesse ocluding broke and for any Hr my horse, in with respect to applicable, E' t all injuries. If bnt that! have treatment to t this Prize List.	ee to all of its ittion, and agree of their officials to owner, agent in bones, head arm of any nature of a more of	provisions. e that any officers, c, coach, traingiries, traine caused saulting from to me o erstand that or guardial aining, coach the office and subm	directors, ainer, or rauma, pad by me of the ne or my horiat I am ein of a jur aching this	employees, as parent or an accident/in a suffering or my horse to be a suffering or a bilities to a coident/in s Agreement	ree that by Federation r , agents, pe guardian o do others, et the Federat lair protective, I consent to safely compury report f electronica	entering this must be brought for a junior exh "Harm"). I AG yen if the Harm"). I AG yen if the Copen of the	ght in nteers ibitor. iREE m aris mpeti r any witho
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Owner	Rider #1	Trainer	Total Fees
Name:Address:	Name:	Name:	Federation Fee @ \$8 Drugs & Medication Fee @ \$8 \$16.00
Phone#:USEF#:	Phone#:USEF#:	Phone#:USEF#:	USEF Show Pass Fee @ \$30 USHJA Show Pass Fee @ \$30
Taxpayer (for prize money)	Rider #2	CHECKS PAYABLE TO:	USHJA Zone Support Fee@ \$2
Name:	Name:	River Run Farm 220 Doansburg Road Brewster, NY 10509	Office Fee @ \$20 \$20.00
Phone#: USEF#:	USEF#:	845-279-3442	TOTAL FEES