

ONLY ONE HORSE PER ENTRY BLANK



**SHOW DATE: Thursday, August 16, 2018** *Mommouth at the Team Bobcat Derby Day (unrecognized)*

Entries can be faxed to 732-261-3454, or made online at [www.horseshowing.com](http://www.horseshowing.com)

Office Use	NAME OF HORSE	USER#	COLOR	SEX	HEIGHT	AGE	Green Yr		Jr Hunter	Pony Size			Equine Canada#
							<input type="checkbox"/> 1	<input type="checkbox"/> 2		<input type="checkbox"/> Lrg	<input type="checkbox"/> Sm	<input type="checkbox"/> Med	

Rider 1 Classes		Rider 2 Classes	

**MAKE CHECKS PAYABLE TO Mommouth at the Team**

Mommouth / August	
\$	Schooling fee Aug 13 \$50
\$100.00	Office/Facility Fee \$100.00 entire week
\$	Hay - \$15 per bale
\$	Shavings - \$10 per bag
	Post Entry Fee \$50
	Stall Fee \$375 Permanent Stall
	Stall Fee \$300 Tent Stall
	Jumper Nominating Fee \$150
\$	TOTAL ENCLOSED

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Valet 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 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, valet, 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, EV14, 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 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 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 I affixed my signature by my own hand. BOD 1/23/11 Effective 12/1/11

UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES. PURSUANT TO O.L. 1997.C. 287 (c.5-1 et. seq.)

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

OWNER SIGNATURE		RIDER 1 SIGNATURE		RIDER 2 SIGNATURE		TRAINER SIGNATURE	
Owner Name		Rider 1 Name		Rider 2 Name		Trainer Name	
USEF/USHA#		USEF/USHA#		USEF/USHA#		USEF/USHA#	
Address		Is Rider a US Citizen: Yes or Nationality:		Is Rider a US Citizen: Yes or Nationality:		Phone	Cell
City/State/Zip		Address		PRIZE MONEY PAYEE		EMAIL	
Phone	Fax	City/State/Zip		SS# or Fed ID#		COACHES SIGNATURE	
Cell Phone		Phone	Cell	Address		Coaches Name	
EMAIL		EMAIL		City/State/Zip		USEF/USHA#	
RESERVE STABLING IN THIS NAME:		STABLE WITH:		ARRIVAL DATE:			
EMERGENCY CONTACT NAME:		CELL PHONE:					