

2019 Entry Form USEF/USDF Licensed, ODS Approved Dressage Show Competitions

Complete both sides - Enclose Proof of Memberships - SIGN all required boxes on page 2

Each person signing is responsible for knowing the Show Rules and of all applicable rules of the organizations recognizing this competition.

For Office Only

Name of Competition: **DRESSAGE AT DEVONWOOD I** Date of Competition: **07/19/2019** to **07/20/2019**

HORSE INFORMATION

Name: _____
 Breed: _____
 Sex _____ Height _____ Color _____
 Year Born _____ DoB if under 4 yrs _____
 Sire: _____
 Dam: _____
 Dam's Sire: _____
 Country of birth: _____
 Breeder: _____
 Breed Reg. No. _____ At stud For Sale
 USEF No. (if any) _____ HID Life Annual
 USDF No. _____ HID Life

RIDER / HANDLER INFORMATION

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Country: _____ Phone: _____
 EMAIL: _____
 Rider Citizenship: _____
 Rider Status (check one): OPEN AA JR/YR
 JR/YR Date of Birth: _____
Parent must sign on back of entry form for minor
 USDF No. _____ or Non-M
 USDF Membership Type: GMO PM YPM
 USEF No. _____ or Non-M
 Are you a ODS Member? Yes No
 Other Membership No. _____

OWNER INFORMATION

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 EMAIL: _____
 USDF No. _____ or Non-M
 USDF Membership Type: GMO PM YPM
 USEF No. _____ or Non-M
 Are you a ODS Member? Yes No
 Other Membership Number: _____

TRAINER INFORMATION

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 EMAIL: _____
 USEF No. _____ or Non-M
 Other Membership Number: _____

COACH INFORMATION

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 USEF Membership No.: _____ or Non-M
 Other Membership No.: _____

STABLING REQUEST

Stall Name or Group: _____
 Arrival: _____ Depart _____
 Notes _____

CLASS FEES (Check Q for qualifying ride)

Class No.	Level	Test	Division	Q	Fee	Post/Late Fee

Qualifying Fee (\$15.00 per qualifying ride) _____
 Class Fees & Post/Late Fees _____

Total Class Fees

USDF/USEF FEES

USDF Non-member fee (applies to Rider and Owner)	Rider	Owner	\$35.00
USDF HID (for horses not recorded with USDF)			\$35.00
USEF Non-member Show Pass (applies to each)	Rider <input type="checkbox"/>	Owner <input type="checkbox"/>	Trainer <input type="checkbox"/>
	Coach <input type="checkbox"/>		\$45.00
USEF Drug and Medication (\$15 plus admin \$8)			\$23.00

Total USDF/USEF Fees

STABLING FEES

Horse Stall	
Tack Stall	
Bedding (no. of bags _____ x _____ per bag)	
Haul In Fee	

Total Stabling Fees

MISCELLANEOUS FEES

Office Fee - Required for EACH Show	
VIP Parking - LOWER LOT	
VIP Parking - UPPER LOT	
VIP Tent - Table or Seats	

Total Miscellaneous Fees

Total Show Fees

Please be sure to include proof of membership for each rider, owner, trainer and coach, also horse USDF and/or USEF number. Process Date: _____ Check No. _____

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 [**DRESSAGE AT DEVONWOOD I & II**] (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 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, 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 of any nature 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 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 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 if I affixed my signature by my own hand.

MANADATORY SIGNATURES

(sign lines 1, 3, and 4 even if same person)

RIDER/DRIVER/HANDLER/VAULTER/LOUNGEUR

TRAINER (adult on grounds responsible for horse)

1. Signature: _____
Print Name: _____

4. Signature: _____
Print Name: _____

PARENT/GUARDIAN (required if rider is a minor)

2. Signature: _____
Print Name: _____

OWNER/AGENT

3. Signature: _____
Print Name: _____

SIGN IF APPLICABLE

COACH

5. Signature: _____
Print Name: _____

VOLUNTEER - (not required, but greatly appreciated):

Name: _____
Phone and email (only if different from Rider): _____
Preferred job: _____

HUMAN EMERGENCY CONTACT INFORMATION

This section is required. An adult, non-minor person must be listed.

Note: Please inform the individual listed as your emergency contact of your participation in the event prior to arrival on the grounds.

Name: _____
Phone No.: _____
Relation to Rider: _____

EQUINE EMERGENCY CONTACT INFORMATION

This section is required. An adult, non-minor person must be listed.

Note: Please inform the individual listed as this horse's emergency contact of your participation in the event prior to arrival on the grounds. Competition Management will first attempt to contact person listed as Trainer regarding an equine emergency.

Name: _____
Phone No.: _____
Staying at: _____