



OWNER				TRAINER			
Owner Name		Trainer Name		Firm Name			
Address		Address		Address			
City		City		City		Zip	
Cell		Cell		Cell		Zip	
Email		Email		Email			
EC #		EC #		EC #		ARRIVAL DATE:	
USEF #		USEF #		USEF #		MISC. FEES	
USHJA #		USHJA #		USHJA #		USEF Drug: \$15	
						USEF Fee: \$8	
						USHJA Horse Fee: \$7	
						FEI Fee: \$25	
						USEF SP Fee: \$45	
						USHJA SP Fee: \$30	
RECIPIENT OF PRIZE MONEY AWARDS				PAYABLE TO			
Name of Individual		Address		HITS, 319 Main Street			
City		City		Saugerties, NY 12477			
State		State		845.246.8833			
Zip		Zip		CANADIAN EXHIBITORS			
Circle One		Circle One		CHECK MUST BE			
Jr		Jr		PRE-PRINTED "U.S. FUNDS"			
Am		Am		TRAINERS - Need to order Tack Stalls, Paddock, RVs, feed/shavings, or do splits?			
Pro		Pro		See "Trainer's Barn Account" under Entry Procedures in Rules and Regs for "how to."			
USEF #		USEF #					
USHJA #		USHJA #					
HORSE NAME				RIDERS			
OFFICE USE ONLY		HORSE NAME		USEF HORSE #		RIDERS	
USEF HORSE #		USEF HORSE #		RIDERS		RIDERS	
EC HORSE #		EC HORSE #		RIDERS		RIDERS	
Check box if horse is NON-SHOWING		Check box if horse is NON-SHOWING		RIDERS		RIDERS	
HORSEPOONY		HORSEPOONY		RIDERS		RIDERS	
SM MD LG		SM MD LG		RIDERS		RIDERS	
YEAR OF BIRTH		YEAR OF BIRTH		RIDERS		RIDERS	
HT.		HT.		RIDERS		RIDERS	
COLOR		COLOR		RIDERS		RIDERS	
SEX		SEX		RIDERS		RIDERS	
CLASS		CLASS		RIDERS		RIDERS	
STABLE WITH:		STABLE WITH:		RIDERS		RIDERS	

WARNING UNDER FLORIDA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR THE DEATH OF, A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. FLA. STAT. S 773.04 (1993)

USEF: I have read the USEF Entry Agreement (GR 906.4) 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, the 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 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 HITS Ocala Series. 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 laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4. 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.

OWNER/AGENT		RIDER/HANDLER		TRAINER	
SIGNATURE:	SIGNATURE:	SIGNATURE:	SIGNATURE:	SIGNATURE:	SIGNATURE:
Print Name:	Print Name:	Print Name:	Print Name:	Print Name:	Print Name:
(Required if Rider/Handler is a minor)					
PARENT/GUARDIAN SIG.:	SIGNATURE:	SIGNATURE:	COACH SIGNATURE:	COACH SIGNATURE:	COACH SIGNATURE:
Print Name:	Print Name:	Print Name:	Print Name:	Print Name:	Print Name:
			Emerg. Contact Phone#	Emerg. Contact Phone#	Emerg. Contact Phone#

OFFICE USE	
Office Fee of \$50 and Ambulance Fee of \$15 per horse will be billed at the show.	
Total Amount Enclosed \$ _____	

WEEKLY FEES	
Horse Deposit	\$ 50 X _____ = \$ _____
Ship In / Grounds Fee	\$ 50 X _____ = \$ _____
Weekly Stall	\$ 250 X _____ = \$ _____
Weekly Stall - Late	\$ 275 X _____ = \$ _____
Weekly Stall - Perm (if available)	\$ 400 X _____ = \$ _____
Paddock	\$ 300 X _____ = \$ _____
RV Hookup (incl Tax)	\$ 390 X _____ = \$ _____
Weekly VIP Membership	TBA X _____ = \$ _____
FEI Deposit/Horse Stall	\$ 600 X _____ = \$ _____
FEI Tack/Feed/Groom Stall	\$ 300 X _____ = \$ _____
Permanent Barn Stall	X _____ = \$ _____
Private Barn Stall	X _____ = \$ _____
CIRCUIT ITEMS (January 16 - March 28)	
Circuit Stall	X _____
Circuit Stall Late	X _____
Circuit Paddock	X _____
Circuit RV	X _____
Total Amount Enclosed \$ _____	



WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

UNITED STATES EQUESTRIAN FEDERATION : 4001 WING COMMANDER WAY : LEXINGTON, KY 40511 : 859.258.2472 : FAX 859.231.6662 : USEF.ORG

For and in consideration of United States Equestrian Federation, Inc. dba US Equestrian ("USEF") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, official, trainer or volunteer) in a USEF sanctioned, licensed or approved event or activity, including but not limited to equestrian clinics, practices, shows, competitions and related or incidental activities and HITS Ocala Series ("USEF Event" or "USEF Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "Agreement"):

A. RULES AND REGULATIONS: I hereby agree that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.USEF.org, as amended from time to time.

B. ACKNOWLEDGMENT OF RISK: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any USEF Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the USEF Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks").

E. COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK. Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

C. ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the USEF Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any USEF Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any USEF Event.

D. WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY: In conjunction with my participation in any USEF Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: USEF, USEF Recognized Affiliate Associations, the United States Olympic & Paralympic Committee (USOPC), USEF clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any USEF Event; any charity or other beneficiary which may benefit from the USEF Event; the owners, managers, or lessors of any facilities or premises where a USEF Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (Individually and Collectively, the "Released Parties" or "Event Organizers"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the USEF Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any USEF Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim. **The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.**

OWNER/AGENT

RIDER/HANDLER

TRAINER

SIGNATURE: _____	SIGNATURE: _____	SIGNATURE: _____
Print Name: _____	Print Name: _____	Print Name: _____
(Required if Rider/Handler is a minor) PARENT/GUARDIAN SIG.: _____	SIGNATURE: _____	COACH SIGNATURE: _____ (if applicable)
Print Name: _____	Print Name: _____	Print Name: _____
		Emerg. Contact Phone# _____

OFFICE USE ONLY

MANDATORY