

ALLTECH NATIONAL HORSE SHOW

November 2 - 6, 2011

Entries must be postmarked by September 7, 2011

Make checks payable and mail to:

Alltech National Horse Show

c/o Ellen Veitch

1517 Richmond Road, Lexington, KY 40502

ARRIVAL DATE:

STABLE WITH:

Horse Name	USEF#	Color		Sex	Height		Yr Foaled		Green Year		Measurement		A/O Age		
		1st Yr Green	2nd Yr Green	Green Conf Hunter	High Perf Hunter	Reg Conf Hunter	A/O Hunter 18-35	A/O Hunter 36+	A/O Hunter 3'3"	Small Junior 15/U	Small Junior 16-17	Large Junior 15/U	Large Junior 16-17	Junior Jumper	Amateur Owner Jumper
Check Boxes for Sections															
Rider 1 Name															
Rider 2 Name															

Federation Entry Agreement

I have read the United States Equestrian Federation, Inc. (The "Federation") Entry Agreement (GR906.4) as printed in the Prize List for The Alltech National Horse Show ("Competition") and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, Prize List and local rules of the competition. I agree to waive the right to the use of my photos from the Competition, and agree that any actions against the federation must be brought in NY State.

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, vaulter, longer, 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 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 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 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 at 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 further AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

EMERGENCY CONTACT INFORMATION

Name: _____
Phone: _____

Owner		Rider 1		Trainer	
Signature: _____		Signature: _____		Signature: _____	
Owner USEF#: _____		Rider 1 USEF#: _____		Trainer USEF#: _____	
Name: _____		Name: _____		Name: _____	
Address: _____		Address: _____		Address: _____	
City/State/Zip: _____		City/State/Zip: _____		City/State/Zip: _____	
Phone _____ Fax _____		Phone _____ Fax _____		Phone _____ Fax _____	
SS#/TIN# _____		Email Address: _____		Email Address: _____	
Corporation? ___Yes ___No		Signature: _____		<p>PLEASE NOTE THE FOLLOWING:</p> <ul style="list-style-type: none"> • Check for \$75 (U.S. Funds Only) must accompany this form. "Open" checks are not accepted. One check per entry blank. • Complete entry form in full and sign before sending. • Do not enclose entry or stabling fees. Invoices will be sent for these fees with acceptance notification. • A complete list of USEF and other fees will be sent with acceptance letter. <p>Please circle below the individual to receive acknowledgement:</p> <p style="text-align: center;">Owner Rider Trainer</p>	
Email Address: _____		Rider 2 USEF#: _____			
ALTERNATE PRIZE MONEY PAYEE:		Name: _____			
Name: _____		Address: _____			
Address: _____		City/State/Zip: _____			
City/State/Zip: _____		Phone _____ Fax _____			
Phone _____		Email Address: _____			
SS/FedID#: _____		Signature: _____			
Parent/Guardian Signature (Required if rider is a minor) _____					

CREDIT CARDS NOT ACCEPTED

Trainer USEF#: _____
Name: _____
Address: _____
City/State/Zip: _____
Phone _____ Fax _____
Email Address: _____

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Please circle below the individual to receive acknowledgement:

Owner Rider Trainer

And indicate to be sent by: Email or Postal Mail