

CAPE COD HUNTER HORSE SHOW

Entries Close 5PM Friday Prior to Show

Date: _____

Circle Show Date You Will Be Attending

March 24 March 31 April 21

May 5 June 16 August 11

August 18 August 29

Send entries to:

Pat Larsen

1 Russett Road

Middletown, RI 02842-5326

FAX: 401-846-4273

One Entry per Horse

email: _____ @ _____

Name of Horse	USEF#	Color	Sex	Height	Age	Pony/Jr. Hunter	Measurement Card #	Trainer or Barn Name

Rider #1 Name:	DOB:	USEF#	MHC#	CLASSES ENTERED	Class#					
Address:	Tel:		ASPCA#		NEHC#	Entry Fees				
Rider #2 Name:	DOB:	USEF#	MHC#	CLASSES ENTERED	Class#					
Address:	Tel:		ASPCA#		NEHC#	Entry Fees				

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 the competition. I agree to be bound by the Bylaws and Rules of the Federation and 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, 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, Southeast Hunters Association Show, NEHC, to the following:

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 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 caused by me or my horse to others, even if the Harm resulted, 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 Federation Rules about protective equipment, including GR801 and 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 AGREE that "the Federation" and "Competition" as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

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 USER accident/injury report form. I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

Rider 1 Parent/Guardian (Mandatory) Signature:	Rider 2 Parent/Guardian (Mandatory) Signature:	Trainer (Mandatory) Signature:
Print Name:	Print Name:	Print Name:
Owner/Agent (Mandatory) Signature:	Owner/Agent (Mandatory) Signature:	Trainer Address:
Print Name:	Print Name:	USEF #: Telephone #:
Owner Address:	Owner Address:	Coach (if applicable) Signature:
USEF #: Telephone #:	USEF #: Telephone #:	Coach Address:

WARNING

Under Massachusetts law, an equine professional is not liable for an injury to, or the death of a participant in equine activities resulting from the inherent risk of equine activities, pursuant to Chapter 28, section 2d of the general laws. I agree to indemnify and save harmless the Cape Cod Hunter Horse Show, its directors, officers, members, employees and agents thereof from and against any and all loss, cost, or expenses or any claim thereof, of whatever nature arising or to arise, for and on account, or by reason of the entry or entries hereby made. I further agree that if any damage shall be occasioned or loss occur by fire or otherwise to the horses exhibited, or to any vehicle or article that I may send with such horses, that I will make no claim and therefore agree to indemnify and hold harmless the owners of Saddle Rowe Farm and Rozenas Field, or its agents, from any loss, costs or expenses or claim thereof.

SIGNATURE _____

There will be a \$50 service charge for any checks returned unpaid. All competitors must present their current USEF and NEHC membership cards or a copy thereof before a number can be given by the secretary.

Entry Fees - Rider 1	
Entry Fees - Rider 2	
Warm Ups @ \$15 / \$10	
Office/EMT/Number Fee	\$20
USEF Drug Fee	\$8
USEF Non-member Fee - \$30	
USEF Admin. Fee	\$8
USHJA Non-member Fee - \$30	
USHJA Member Fee - - - \$2	
Post-Entry Fee @ \$25	
MHC Fee	\$1
CCHHS Fee	\$5
Make checks payable to: CCHHS	
Rider #1 - Cash	
Rider #1 - Check #	
Rider #2 - Cash	
Rider #2 - Check #	