**2011** *DRESSAGE COMPETITION ENTRY FORM*Effective December 1, 2010, use this form for entering USEF/USDF Licensed Dressage Competitions held in USDF Region 1 (PA, NJ, DE, MD, VA, NC, WV)

Competitors are responsible for duplicating their own additional copies of this entry form. This is a 2-sided form; please make 2-sided copies. Other versions of entry forms may not be accepted by Region 1 competitions. Type OR PRINT CLEARLY. ONLY ONE HORSE / PIDER or HANDLED FOR ENTRY FORM.

Official Use Only	Bridle No.

		ONLY ONE HORSE / RIDER or HANDLE ds (Rider/Handler, Owner/Agent, Trainer, Co		M			
	petition Name:			etition Date(s):			
	AME OF HORSE (Horse MUST be na	amed) BREED COUNTRY (WI	•		AGE DOE	3	
(must at	Coggins ttach copy):	Breed Registration Number:		Check here If this horse is f you want this to be listed in			
Sire:	Coord Harry Donadison (DCHD) alarges C	Dam:		Dam's Sire:			
names re	ssage Sport Horse Breeding (DSHB) classes, Si equired for ALL breed registered horses & reco	ommended for others.  Breeder:					
Rider/	/Handler:	Primary Phon	ie:	Alternate Phone:			
Rider'	's Address:						
Rider/	/Handler E-Mail:			Citizenship*	:		
Owne	er:	Primary Phone: _		Alternate Phone:			
Owne	er's Address:			E-Mail:			
Traine	er:	Trainer's Address:					
Coach	h:	Trainer's Phone during C	Competition:				
	HORSE RIDER/HAI		•		OACH (if applicab	ole)	
USEF#	USEF#	USEF#	USEF#	USE	<del>-</del> #		
USDF#	USDF#	USDF#					
	LOCAL ASSN #	All USEF members (including	riders, handlers, trainer	rs, coaches, owners, agents	or lessees) are requi	ired t	
Go to h	eting as an Adult Amateur. http://www.eqverification.org/ to prints # Day Class Name (Level//Divi		in their own N.F in order	ses MUST attach current p r to be exempt from USEF no Payment For	roof, in English, of co on-member fees. Fee Office		
			Subtotal, Cl				
			USEF Non-M (\$30 per part	Member Fee(s)			
			USEF Fee po	er horse:			
			CDI horses	JSEF \$8) = \$15 only: USEF Fee per			
			horse: (D&M CDIs only: U	\$15 + USEF \$8) = \$23   JSEF IHP Discipline Fee			
			(\$35 per entr	ry) ounds Fee (For Non- ses)			
			Stabled Hors	ses) Member Fee(s)			
			(\$25 per ride				
			Office Fee				
			Late Fee, Bridle Number Fee, Camper Fee				
	SUBT	OTAL Class Fees	Other Fee(s)				
	YR Birthdate:	Riders are eligible to compete an which they reach the age of 21	ıs T	OTAL FEES DUE:			
		// CDI-J/ CDI-P COMPETITORS MUST COMPL	LETE THE FOLLOWING	G INFORMATION:			
Rider:	Citizenship:	FEI Rider Registration	ı#:	Competing for Country	!		
Horse:	Present Nationality:	Birthdate:		Previous Name (if any):			
	FEI Passport #:	FEI Horse Registration	ı #:	Person Responsible:			
Owner:	: Citizenship:	Owner Social Security of	or Tax ID # (required to	# (required to receive prize money):			

US Equestrian Federation, Inc. Entry Agreement I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for [insert name here] ("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 from the competition, and agree that any actions against the Federation must be brought in New York 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, 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 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 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.

*RIDER/HANDLER (mandatory)	*OWNER / AGENT (mandatory)	*TRAINER (mandatory)	COACH (If applicable)
Signature:	Signature:	Signature (must be 18 or older):	Signature:
Print:	Print:	Print:	Print:
PARENT/GUARDIAN (Required if	rider/handler is a minor, i.e. under 18)	Home Emergency Phone Contact #	Is RIDER a U.S. citizen? (mandatory)
Signature:	Print:		YES NO

" Ivo entry is valid wi	itnout orig	ınaı sıgna	itures irom	tne above	e inaiviaua	ais; Pnoto	copiea sig	gnatures d	or Writii	ng "same" are NOT acceptable.	
STABLING / CAMPER HO	OK-UP R	ESERVA	TION FOR	M (Refer	r to Prize	List for S	Specificat	tions)		ENTRY PREPARATION CHECKLIST	
Contact NAME and NUMBER for	or Rider E	mergency	: Cor	itact NAM	E and NUI	MBER for	Horse Em	ergency:	E	Before Mailing, Be Sure You Have:	
1					1						
Name of Lodgings Where Rider or Responsible Party Will be Staying During the Competition (For Emergency Contact Purposes)								  -    -	Completed Both Sides of Entry FormAll Original Required SignaturesEnclosed a Copy of the Current Negative Coggins (EIA) Certificate (Refer to the Competition		
Stall	Sex		k Stall Day						1 1	· ·	
Occupant	(S,M,G)	Mon	Tues	Wed	Thurs	Fri	Sat	Sun		Specifications for date validity	
Horse Name									$\  \ \ _{_{-}}$	requirements.) Copy must be legibleSupplied all Required Ass'n Numbers	
If accompanied by NON-C	OMPETING	HORSE, mu	ist complete s	eparate entr	y form and p	oay all appli	cable fees.		1	Enclosed Copies of Applicable USEF	
Tack	n/a								$\left[ \ \ \right] _{-}$	and/or USDF Cards or DocumentsCompleted the Stabling / Camper	
Approx. Time of Arrival: Approx. Time of Departure:  Special Requests*:									Reservation Form —Enclosed a Check / Money Order for all Applicable Fees. —Attached photocopy of Test(s) verifying USDF & FEI Freestyle Test eligibility (ex. for exempt classes)		
*Provide name of individual with whom you desire to be stabled (if part of a group, make sure you all name the same person)  Stabling fees: stalls for nights @ \$ per night =								- (	Mail this Entry Form, Supplemental Documents, and Fees to the Competition (Entry) Secretary Identified on the Prize List.		
Camper feeshook-ups @ \$ea (flat rate) ORnights @ \$ per night =									RIDER / TRAINER EMERGENCY CELL PHONE CONTACT NUMBER AT COMPETITION:		
	TC	TAL STA	BLING / CA	AMPER HO	OOK-UP F	EES:					