

Checks to: James River Hunt  
781 Ledford Lane, Smithfield, VA 23430

757-357-1775

HORSE					HORSE USEF #	CLASSES FOR RIDER/HANDLER #1	CLASSES FOR RIDER/HANDLER #2
Color	Sex	Ht.	Age	Green 1 2	Pony Sm Md Lg	Breeding Entries Name of Sire:	Breeding Entries Name of Dam:

OWNER OR AGENT	RIDER/HANDLER #1	RIDER /HANDLER #2
Owner Name _____	Rider Name _____	Rider Name _____
Address _____	Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____ E-Mail _____	Phone _____ Jr. Birthdate _____	Phone _____ Jr. Birthdate _____
Owner USEF _____	Rider USEF _____	Rider USEF _____
Owner/Agent Signature _____	Rider Signature _____ <i>(Parent or Guardian, if minor or if not available trainer signature)</i>	Rider Signature _____ <i>(Parent or Guardian, if minor or if not available trainer signature)</i>

RECIPIENT OF PRIZE MONEY	TRAINER	COACH
Name of Recipient _____	Trainer Name _____	Coach Name _____
SS or Fed ID # _____	Farm Name _____	Farm Name _____
Address _____	Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone _____	Phone _____ E-Mail _____	Phone _____ E-Mail _____
<b>The above is for tax purposes, and must be filled out legibly and completely by any entries receiving showing in divisions that give prize money . Be certain to have all numbers accurately filled in.</b>	Trainer USEF _____	Coach USEF _____
	Trainer Signature _____	Coach Signature _____

# of Stalls Needed _____	Stable with: _____	Phone No. ( _____ ) _____	Arrival Date _____	Departure Date _____
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**USEF 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 the James River Hunt Horse Show 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, lessee, owner, agent, coach, trainer, or as a 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 for all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any injury 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, and for claims made by others for any Harm caused by me or my horse at 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 EV113, 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 provisions 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 their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.  
 I represent that I have the requisite training, coaching and abilities to safely compete in this competition.  
 BY SIGNING THIS AGREEMENT, I further AGREE to be bound by all applicable Federation Rules, and all terms and provisions of this entry blank.

Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_ Is Rider/Driver/Vaulter a U.S. Citizen? \_\_\_\_ Yes \_\_\_\_ No

Stall - \$175 x _____ = \$ _____
One Night Stall - \$125 x _____ = \$ _____ <i>(Move in one night stall not before 6 pm and out by 4 pm)</i>
Ship In - \$35 x _____ = \$ _____
Office - \$35 x _____ = \$ _____
USEF Fee \$15 x _____ = \$ _____ <i>(\$8 USEF Fee \$7 Drug &amp; Med)</i>
USEF Non Member \$30 x _____ = \$ _____
USHJA Non Member \$30 x _____ = \$ _____
USHJA Zone Support \$2 x _____ = \$ _____