

# THE PINES OPEN HORSE SHOW

Date of Show: \_\_\_\_\_

*Mail or Fax Entries Only To:*

**LESLIE HUTTON**

66 Longbottom Road, Southington, CT 06489

Fax: 860-620-1739

NAME OF HORSE	USEF #	COLOR	SEX	HEIGHT	AGE	PONY / JR HUNTER			MEASUREMENT CARD #	1st Year [ ]	2nd Year [ ]
						SM	MED	LG			

RIDER #1		JR'S AGE as of 12/1/07		AMATEUR CERT #	
NAME					
ADDRESS				NEHC #	
				18-35 [ ] Over 35 [ ]	
				Check One if Applicable	

CLASSES ENTERED—RIDER # 1				
CLASS #				
FEE \$				
CLASS #				

THIS AREA FOR OFFICE USE ONLY  
 CIRCLE IF NEEDED  
 CHECK BOX IF OKAY  
 CHJA #  
 SIGNATURE

### NEHC, CHJA and CHSA Entry Agreement

I have read the NEHC, CHJA, and CHSA Entry Agreement as printed in the Prize List for this competition and agree to all of its provision. I understand and agree that by entering this Competition, I am subject to the Rules, in the Prize List, and the local rules of the competition. I agree to waive the right to the use of my photos at the competition,

#### NEHC, CHJA & CHSA 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 (The Pines Farm Open) to the following:

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 release the Affiliated Organizations 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 Organizations 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 Organizations and or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Organizations 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 at the Competition.

I have read the Federation Rules about protective equipment, including GR 801 and EV 113, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that I am strongly encourages 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 AGREE that "the Organizations" 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.

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 Rules and all terms and provisions of this entry blank.**

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
 Rider's Signature (Parent or Guardian if under 18; Trainer's Signature Owner's Signature  
 If unavailable, Trainer must sign.

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Street: \_\_\_\_\_ Street: \_\_\_\_\_ Street: \_\_\_\_\_

City/state/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_ City/state/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Rider's USEF # \_\_\_\_\_ Trainer's JSEF # \_\_\_\_\_ Owner's USEF #: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_

Required if Rider/Driver/Handler/Vaulter/Longeur is a Minor. Is Rider/Driver/Vaulter a U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

*Entry Fees: Flat Classes: \$20.00*

*All Fence Classes: \$25.00*

*Medal Classes \$30.00*

*Warm-Up Classes:*

*\$20.00 Each Trip*

*Non-Showing Fee:*

*\$30.00 per horse or pony*

*Championship and*

*Reserve Ribbons*

*offered in each Division*

# _____ STALLS @ \$30/nite	
STALLS MUST BE PREPAID	
ENTRY FEES	
WARM-UPS \$20.00	
POST ENTRY FEES \$20.00	
OFFICE FEE \$20.00	
TOTAL DUE	
CREDIT VOUCHERS/PURSES	
ACCOUNT BALANCE	