

TUCSON FALL PREVIEW - October 28-30, 2011

Entries Close October 10, 2011

PRINT
 Owner Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 SS/Fed ID# (No prize money issued without SS#) _____

Make checks payable to: SWFC
 Mail entries to: Barb Ahrens
 8680 Rebecca Park Trail
 Rockford, MN 55373
 763 477 6023
 763 477 4053 Fax

This entry form MUST include: Name of horse and complete description, name of owner, address, name of Trainer, and classes that you intend to compete in.

PRINT
 Trainer Name _____
 Barn Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

HORSE NAME					USEF HORSE#	RIDER	Age
Color	Sex	Age	Ht	Green	EC HORSE#	RIDER	Age
				1 2			

CLASSES					
CLASSES					

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for the Tucson Fall Preview/Festival/ Classic Horse Shows 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 waiver 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 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 AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.

PRINT
 Rider Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

PRINT
 Rider Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

Rider/Driver/Handler/Vaulter/Longeur (mandatory) (Parent/Guardian if Rider/Handler is a minor) Signature: _____ Print Rider Name _____	Trainer (mandatory) Signature _____ Print Name _____	Owner/Agent (mandatory) Signature _____ Print Name _____
Rider/Driver/Handler/Vaulter/Longeur (mandatory) (Parent/Guardian if Rider/Handler is a minor) Signature: _____ Print Rider Name _____	Coach (if applicable) Signature _____ Print Name _____	<p>ATTENTION</p> <p>All entries must include: Check for payment of Stalls, Drug Fee, Office Fee and Open Check for Entries.</p>
Parent/Guardian Name _____		
Is Rider/Driver/Vaulter a U.S. Citizen: ___ Yes ___ No Emergency Contact Phone Number _____		

Stall Fee \$125/Tack Stall \$125	\$125.00	_____
USEF (Drug \$7-USEF \$8)	\$ 15.00	\$ 15.00
USHJA Fee	\$ 2.00	\$ 2.00
Office/Facility Fee	\$ 35.00	\$ 35.00
USEF Non Member	\$ 30.00	_____
USHJA Non Member	\$ 30.00	_____
Jumper Nomination	\$100.00	_____
Late Fee	\$ 50.00	_____
RV Space	\$140.00	_____
Turn Out Paddock (\$150/\$300)	_____	_____
AHJA Fee	\$ 2.00	_____
Zone 8 Fee	\$ 1.00	_____
Check # _____ Amount Enclosed \$	_____	_____
Stable With _____		

TUCSON FALL FESTIVAL - November 2-6, 2011

Entries Close October 10, 2011

Make checks payable to: SWFC
 Mail entries to: Barb Ahrens
 8680 Rebecca Park Trail
 Rockford, MN 55373
 763 477 6023
 763 477 4053 Fax

This entry form MUST include: Name of horse and complete description, name of owner, address, name of Trainer, and classes that you intend to compete in.

PRINT
 Owner Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 SS/Fed ID# (No prize money issued without SS#)

HORSE NAME					USEF HORSE#	RIDER	Age
Color	Sex	Age	Ht	Green	EC HORSE#	RIDER	Age
				1 2			

I have read the United States Equestrian, Inc. (the "Federation") Entry Agreement (GR 906.4) as printed in the Prize List for the Tucson Fall Preview/Festival/Classic Horse Shows 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 waiver 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.

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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.

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

Rider/Driver/Handler/Vaulter/Longeur (mandatory) (Parent/Guardian if Rider/Handler is a minor) Signature: _____ Print Rider Name _____	Trainer (mandatory) Signature _____ Print Name _____	Owner/Agent (mandatory) Signature _____ Print Name _____
	Coach (if applicable) Signature _____ Print Name _____	
Rider/Driver/Handler/Vaulter/Longeur (mandatory) (Parent/Guardian if Rider/Handler is a minor) Signature: _____ Print Rider Name _____	Parent/Guardian Name _____ Is Rider/Driver/Vaulter a U.S. Citizen: ___ Yes ___ No Emergency Contact Phone Number _____	

ATTENTION
 All entries must include:
 Check for payment of Stalls,
 Drug Fee, Office Fee and
Open Check for Entries.

PRINT
 Trainer Name _____
 Barn Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

CLASSES

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CLASSES

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PRINT
 Rider Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

PRINT
 Rider Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 USEF/USHJA# _____
 ASPCA# _____

Stall Fee \$175/Tack Stall \$175	\$175.00	_____
USEF (Drug \$7-USEF \$8)	\$ 15.00	\$ 15.00
USHJA Fee	\$ 2.00	\$ 2.00
Office/Facility Fee	\$ 35.00	\$ 35.00
USEF Non Member	\$ 30.00	_____
USHJA Non Member	\$ 30.00	_____
Jumper Nomination	\$100.00	_____
Late Fee	\$ 50.00	_____
RV Space	\$140.00	_____
Turn Out Paddock (\$150/\$300)	_____	_____
AHJA Fee	\$ 2.00	_____
Zone 8 Fee	\$ 1.00	_____
Check # _____ Amount Enclosed \$ _____		
Stable With _____		

TUCSON FALL CLASSIC - November 9-13, 2011

Entries Close October 10, 2011

PRINT
Owner Name _____
Address _____
City/State/Zip _____
Phone _____
USEF/USHJA# _____
SS/Fed ID# (No prize money issued without SS#)

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Mail entries to: Barb Ahrens
8680 Rebecca Park Trail
Rockford, MN 55373
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763 477 4053 Fax

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PRINT
Trainer Name _____
Barn Name _____
Address _____
City/State/Zip _____
Phone _____
USEF/USHJA # _____
ASPCA # _____

HORSE NAME					USEF HORSE#	RIDER	Age	CLASSES						
Color	Sex	Age	Ht	Green	EC HORSE#	RIDER	Age							
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Address _____
City/State/Zip _____
Phone _____
USEF/USHJA# _____
ASPCA# _____

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Address _____
City/State/Zip _____
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ASPCA# _____

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Amount Enclosed \$ _____	Check # _____	_____
Stable With _____		