

Make checks payable to:WTHJA
 Mail to: Barney Mallace
 8390 Woodmanor Cv.
 Cordova, TN 38016

HARVEST TIME

NOVEMBER 9 - 12 2017

Entries Close
Saturday 10/26/2017

HORSE / PONY NAME	HORSE / PONY USEF #	Sex	Color	Breed	Height	Age	Jr. Hunters / Ponies		
							Small Large	Medium Green	
Classes Entered		Rider Name							
		Rider #1					Birthdate:		
		Rider #2					Birthdate:		
		Rider #3					Birthdate:		

<p><u>Owner/Agent</u></p> <p>Print Name _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Phone# _____</p> <p>USEF # _____</p> <p>EMAIL _____</p> <p><u>Trainer</u></p> <p>Print Name _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Phone# _____</p> <p>USEF # _____</p> <p>EMAIL _____</p> <p><u>Rider #1</u></p> <p>Print Name _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Phone# _____</p> <p>USEF # _____</p> <p>EMAIL _____</p>	<p><u>Rider #2</u></p> <p>Print Name _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Phone# _____</p> <p>USEF # _____</p> <p>EMAIL _____</p> <p><u>Rider #3</u></p> <p>Print Name _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Phone# _____</p> <p>USEF # _____</p> <p>EMAIL _____</p>
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PRIZE MONEY RECIPIENT INFORMATION
 *****must be completed*****

Recipient name: _____

SS# / Tax ID #: _____

Recipient Address: _____

City: _____ **State:** _____ **Zip:** _____

Medic Fee--\$20	\$20
Stalls reserved & ppd by 10/26--\$180	Must be a filled in Ck or C Card
Stalls reserved & not ppd--\$200	
Stalls reserved after 10/26--\$225	
Office Fee-\$60/Late Fee--\$60	
RV fee--\$150	
Assn show pass fee--\$30 ea.	
USHJA Zone support fee--\$7	\$7
USEF Fee (Drugs & Med \$8/USEF \$8)	\$16
Non-Showing Horse fee--\$50	
Grounds Fee--\$50	

Credit Card# _____

exp. Date: _____ v-code: _____ circle one below:

Cardholder _____ VISA - MC - AMEX - DISCOVER

Signature>> _____

STABLE WITH: _____

Emergency contact # _____

DON'T FORGET
 VVVVVVV

SIGNATURES REQUIRED
ON THE BACK !!

UNITED STATES 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 this 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 at 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, longer, 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 of 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 and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand. BOD 1/23/11 Effective 12/1/11.

Owner/Agent (mandatory)

Trainer (mandatory)

Rider #1 (mandatory)

Adult Signature: _____

Adult Signature: _____

Adult Signature: _____

Print name: _____

Print name: _____

Print name: _____

Rider #2 (mandatory)

Rider #3 (mandatory)

Coach (if applicable)

Adult Signature: _____

Adult Signature: _____

Adult Signature: _____

Print name: _____

Print name: _____

Print name: _____

Is Rider a U.S. Citizen?

(Rider #1 ___Yes___ No)

(Rider #2 ___Yes___ No)

(Rider #3 ___Yes___ No)