

SAGAPONACK HORSE SHOW

July 18, 2018 & August 8, 2018

ENTRIES CLOSE 6:00 PM MONDAY PRIOR TO EACH SHOW

NOTE: Exhibitors must have current USEF/USHJA membership

NAME OF HORSE OR PONY		HORSE RECORDING OR ID #		COLOR	SEX	HEIGHT	AGE	HORSE/PONY
NAME OF RIDER ONE		AGE	USEF/USHJA #		CLASSES			
NAME OF RIDER TWO		AGE						
OWNER OR AUTHORIZED AGENT			RIDER ONE			TRAINER		
NAME			NAME		DOB M/D/Y	GENDER	NAME	
ADDRESS			ADDRESS			ADDRESS		
CITY/STATE/ZIP			CITY/STATE/ZIP			CITY/STATE/ZIP		
TELEPHONE		EMAIL	TELEPHONE		EMAIL	TELEPHONE		EMAIL
USEF/USHJA #			USEF/USHJA/FEI #			USEF/USHJA #		

All horses and ponies MUST have USEF Recording # or Horse ID #

ALL EXHIBITORS MUST PAY IN U.S. FUNDS

Entries can be faxed to 631-537-5443, emailed to kate@hamptonclassic.com or brought to the Hampton Classic Horse Show Office

FEES

Entry Fees	\$ _____
Post Entry	\$30
USEF Drugs/Medications Fee	\$15
USEF Federation Fee	\$8
USEF Show Pass Fee	\$45
USHJA Show Pass Fee	\$30
Office Fee	\$35
USHJA Fee	\$2
TOTAL DUE	\$ _____

RIDER TWO				OFFICE USE ONLY:					
<p align="center">SAGAPONACK HORSE SHOW PO Box 99, Sagaponack, NY 11962 Phones: (631) 537-0948 Fax: (631) 537-5443</p>				NAME		DOB M/D/Y	GENDER		
				ADDRESS					
				CITY/STATE/ZIP					
				TELEPHONE			EMAIL		
				USEF/USHJA/FEI #					

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 above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

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 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.



MANDATORY

Owner/Agent Signature: _____
 Print Name: _____

(Required if Rider/Handler is a minor)
 PARENT/GUARDIAN SIGNATURE: _____
 Print Name: _____

EMERGENCY CONTACT PHONE # _____

RIDER/HANDLER SIGNATURE: _____
 Print Name: _____
 Is Rider a U.S. Citizen: YES ___ NO ___

RIDER/HANDLER SIGNATURE: _____
 Print Name: _____
 Is Rider a U.S. Citizen: YES ___ NO ___

TRAINER SIGNATURE: _____
 Print Name: _____

COACH SIGNATURE: _____
 (if applicable)
 Print Name: _____