

Mid States Spring: Stall Counts Due 4-18-16 Entries Close 4-25-16

Send entries to:
 Mid States Horse Shows
 PO Box 549
 Elkhorn NE 68022

HORSE		Name		Color		Breed		Stable With		Arrives	
USEF		Sex		HT		Age		Green		FOR OFFICE USE	
Sire		Passport		Meas. Card		MC HT					

PRIZE RECIPIENT		Name, Address, Phone	
CREDIT CARD		Number/Type	
Expires		CSC	
Zip		Signature	
Rider 1:		Rider 2:	

LEGAL	
<p>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.</p> <p>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.</p>	
<p>OWNER Name, Address, Phone, Email</p> <p>TRAINER Name, Address, Phone, Email</p> <p>RIDER 1 Name, Address, Phone, Email</p> <p>RIDER 2 Name, Address, Phone, Email</p> <p>Total Enclosed</p>	

USEF	ASPCA	USEF	ASPCA	USEF	ASPCA	USEF	ASPCA
Nationality	DOB	Age	Status	Nationality	DOB	Age	Status
Owner Signature:	Trainer Signature:			Rider 1 Signature:			Rider 2 Signature:
Emergency Contact	Coach Signature:			Rider 1 Parent Signature:			Rider 2 Parent Signature: