			Horse Deta	ils				4 11:59 pm CS		
Horse- Show Name			Sex	Age	Ht	Stable with/Barn	Associated with			
Horse-Barn Name (If Applicable)										
USEF			Color	Color			Estimated Arrival Date and Time			
Prize Recipient C			Classes			Makes Checks Payable to Mid States or give Credit Card details				
Name	Ri	Rider 1:				Name on Card				
Address						Number/Type				
Phone number	Rider 2:					Expires	CSC		Zip	
Tax ID						Signature				
Inc. (the "Federation") and the local rules of				and hold harmless the competition, the Federa- or participate under the Rules, and every horse I on and/or the Competition may use or assign pho- uring the course of the competition for the promo- ct and they may not be used in such a way as to ding any claim to compensation, invasion of priva- f the Stateof New York, and any action instituted bscriber, I acknowledge that I will be enrolled for tionally, I acknowledge that the benefits of a USEF wledge that I may opt out at any time by going to und by all applicable Federation Bylaws, rules, and .org, as amended from time to time, as well as all ctronic signature shall have the same validity, urry to or the death of a participant resulting suming inherent risks of participating in this			Other Barn Stall After Closing Lester Barn Stall Fee Lester Barn after closing Stall Fee -1 Day/Nt Stall Fee, Day (if available) Jump Out/Day Drug, USEF (\$15/\$18) USHJA Fee National USHJA Outreach Only USEF show pass fee USHJA show pass fee Office Fee Medic Fee/Schooling Fee Late Entry Fee Non show w/ stall and entry Jumper Nom. Fee Jmpr Nom. Fee after close Camper Fee Credit Card Charge Please include stall and office fees with deposit Name: Address:		\$23.00 \$7.00 \$7.00 See Prize e only \$50.00 \$60.00	

DOB

Rider 1 Signature

Emergency Contact

Age

Status

DOB

Rider 2 Signature

Emergency Contact

Age

Status

DOB

Owner Signature

Emergency Contact

Age

Status

DOB

Trainer Signature

Emergency Contact

Age

Status