



PASO ROBLES HORSE PARK

# Rosé in May • May 26-29, 2022

MAIL 3801 Hughes Parkway, Paso Robles, CA 93446 • EMAIL office@pasorobleshorsepark.com • ENTRIES CLOSE May 9, 2022

Office Use Only

We strongly recommend completing entries at horseshowing.com to take advantage of the NEW digital office benefits.

Horse's Name:		USEF/USHJA #:	
Breed:	Color:	Age:	Sex:
Height:	Office Use Only: [ ] Measurement Card Verified		
Check Horse / Pony Size: [ ] Small [ ] Medium [ ] Large		Microchip #:	
Owner's Name:		USEF/USHJA #:	
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] N/M		
City:	USHJA Verify: [ ] Card [ ] JAS [ ] N/M		
Email Address:	US Citizen: [ ] Yes [ ] No		
Phone: ( )			
Trainer's Name:		USEF/USHJA #:	
Barn / Farm Name:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] N/M		
Address:	USHJA Verify: [ ] Card [ ] JAS [ ] N/M		
City:	US Citizen: [ ] Yes [ ] No		
Email Address:	Phone: ( )		
Rider 1 Name:		USEF/USHJA #:	
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] N/M		
City:	USHJA Verify: [ ] Card [ ] JAS [ ] N/M		
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCAI #:	PCHA #:	
Rider 2 Name:		USEF/USHJA #:	
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] N/M		
City:	USHJA Verify: [ ] Card [ ] JAS [ ] N/M		
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCAI #:	PCHA #:	
Rider 3 Name:		USEF/USHJA #:	
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] N/M		
City:	USHJA Verify: [ ] Card [ ] JAS [ ] N/M		
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCAI #:	PCHA #:	
Prize Money Payee:		Email Address:	
Address:	SSN or Fed Tax ID #:		
City:	State:	Zip:	
Emergency Contact (during the show) - Name: _____ Phone: ( ) _____			

### Fees Due With This Entry

**Stalls:** \$150 x \_\_\_\_\_ = \$ \_\_\_\_\_  
 Stall Discounts: Eligible discounts will be applied at the time of check out. Competitors **MUST** provide proof that horse is 7 years or younger, or that the rider is a member of Pony Club, IEA, or a collegiate equestrian team **PRIOR** to check out to receive discount.

**Total Enclosed:** \$ \_\_\_\_\_  
 To pay by credit card, please fill out the Credit Card Authorization for the USHF/USHJA. The authorization must include a check payable. Credit card and check payments will be deposited on the entry closing date.

### Other Possible Fees Due At The Show

Late Entry Fee **\$50**  
 (If entry is received after closing date)  
 USEF Fee **\$23** / USHJA Fee **\$2**  
 Office Fee **\$6** / California Drug Fee **\$8**  
 USEF Show Pass Fee **\$45**  
 USHJA Show Pass Fee **\$30**  
 (If not a USEF and/or USHJA Member)

### Sections / Classes for Rider 1

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Sections / Classes for Rider 2

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Sections / Classes for Rider 3

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Office Use Only

Entry Postmarked: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Amount Received: \$ \_\_\_\_\_  
 Check #: \_\_\_\_\_ CC Transaction #: \_\_\_\_\_



### FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Valet or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of the United States Equestrian Federation, Inc. (the "Federation") and the local rules of \_\_\_\_\_ (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audio, cable-casts, broadcasts, internet, film, new media or other likeness of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR9084.

**BY SIGNING BELOW, I AGREE** that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAAP) as published at www.usdfe.org, as amended from time to time, as well as 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.

### RIDER/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### TRAINER (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### OWNER/AGENT (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### COACH (if applicable)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultor/Longeur is a minor)

Print Parent/Guardian Name: \_\_\_\_\_

Is Rider/Driver/Handler a U.S. Citizen: \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_\_ Emergency Contact Phone No. \_\_\_\_\_

### ADDITIONAL WAIVER & RELEASE FORMS

Please note that every person on the property must sign have a signed Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, grooms, etc.) with this entry form.



PASO ROBLES HORSE PARK

# Paso Pumpkins & Ponies • October 13-16, 2022

MAIL 3801 Hughes Parkway, Paso Robles, CA 93446 • EMAIL office@pasorobleshorsepark.com • ENTRIES CLOSE Sept. 26, 2022

Office Use Only

We strongly recommend completing entries at [horseshowing.com](http://horseshowing.com) to take advantage of the NEW digital office benefits.

Horse's Name:	USEF/USHJA #:
Breed:	Office Use Only: [ ] Measurement Card Verified
Color:	Age:
Sex:	Height:
Check Horse / Pony Size: [ ] Small [ ] Medium [ ] Large	Microchip #:
Owner's Name:	USEF/USHJA #:
Address:	USEF Verify: [ ] Card [ ] S/B [ ] J/A/S [ ] N/M
City:	USHJA Verify: [ ] Card [ ] J/A/S [ ] N/M
State:	US Citizen: [ ] Yes [ ] No
Zip:	
Email Address:	
Phone: ( )	

Trainer's Name:	USEF/USHJA #:
Barn / Farm Name:	USEF Verify: [ ] Card [ ] S/B [ ] J/A/S [ ] N/M
Address:	USHJA Verify: [ ] Card [ ] J/A/S [ ] N/M
City:	US Citizen: [ ] Yes [ ] No
State:	Phone: ( )
Zip:	
Email Address:	

Rider 1 Name:	USEF/USHJA #:
Address:	USEF Verify: [ ] Card [ ] S/B [ ] J/A/S [ ] N/M
City:	USHJA Verify: [ ] Card [ ] J/A/S [ ] N/M
State:	US Citizen: [ ] Yes [ ] No
Zip:	
Email Address:	
USEF Birthdate: ___/___/___	No/Col #: _____
CPHA #:	CPHA #:

Rider 2 Name:	USEF/USHJA #:
Address:	USEF Verify: [ ] Card [ ] S/B [ ] J/A/S [ ] N/M
City:	USHJA Verify: [ ] Card [ ] J/A/S [ ] N/M
State:	US Citizen: [ ] Yes [ ] No
Zip:	
Email Address:	
USEF Birthdate: ___/___/___	No/Col #: _____
CPHA #:	CPHA #:

Rider 3 Name:	USEF/USHJA #:
Address:	USEF Verify: [ ] Card [ ] S/B [ ] J/A/S [ ] N/M
City:	USHJA Verify: [ ] Card [ ] J/A/S [ ] N/M
State:	US Citizen: [ ] Yes [ ] No
Zip:	
Email Address:	
USEF Birthdate: ___/___/___	No/Col #: _____
CPHA #:	CPHA #:

Prize Money Payee:	SSN or Fed Tax ID #:
Address:	
City:	
State:	
Zip:	
Email Address:	
Emergency Contact (during the show) - Name:	Phone: ( )

**Fees Due With This Entry**

Stalls: \$150 x \_\_\_\_\_ = \$ \_\_\_\_\_

**Stall Discounts:** Eligible discounts will be applied at the time of check out. Competitors **MUST** provide proof that horse is 7 years or younger, or that the rider is a member of Pony Club, IEA, or a collegiate equestrian team **PRIOR** to check out to receive discount.

**Total Enclosed: \$ \_\_\_\_\_**

To pay by credit card, please fill out the Credit Card Authorization form, located in this prize list and submit with this entry. Otherwise, please deposit your credit card and check payments will be deposited on the entry closing date.

**Other Possible Fees Due At The Show**

Late Entry Fee **\$50**  
*(If entry is received after closing date)*

USEF Fee **\$23** / USHJA Fee **\$2**  
 Office Fee **\$6** / California Drug Fee **\$8**  
 USEF Show Pass Fee **\$45**  
 USHJA Show Pass Fee **\$30**  
*(If not a USEF and/or USHJA Member)*

Sections / Classes for Rider 1

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sections / Classes for Rider 2

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sections / Classes for Rider 3

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Office Use Only

Entry Postmarked: \_\_\_/\_\_\_/\_\_\_

Amount Received: \$ \_\_\_\_\_

Check #: \_\_\_\_\_ CC Transaction #: \_\_\_\_\_

**FEDERATION ENTRY AGREEMENT**

By entering a Federation-licensed competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Valet or longer and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of the United States Equestrian Federation, Inc. (the "Federation") and the local rules of \_\_\_\_\_ PASO PUMPKINS & PONIES \_\_\_\_\_ (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the Competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the competition may use or assign photographs, videos, audio, cable-casts, broadcasts, internet, film, new media or other businesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those businesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status, thereby expressly and irrevocably waive and release any rights in connection with such use, including, any claim to compensation, invasion of privacy, right of publicity, or to disparagement. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See USR208.1.

**BY SIGNING BELOW I AGREE** that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAAP) as published at [www.usef.org](http://www.usef.org), as amended from time to time, as well as 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.

**RIDER/DRIVER/HANDLER/VALET/LONGEUR (mandatory)**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

**TRAINER (mandatory)**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

**OWNER/AGENT (mandatory)**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

**COACH (if applicable)**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Valet/Agent is a minor) \_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_

Emergency Contact Phone No. \_\_\_\_\_

Is Rider/Driver/Handler a U.S. Citizen: Yes \_\_\_ No \_\_\_

**ADDITIONAL WAIVER & RELEASE FORMS**

Please note that every person on the property must sign have a signed Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, grooms, etc.) with this entry form.



PASO ROBLES HORSE PARK

# Turkey Trot & Jump • November 17-20, 2022

MAIL 3801 Hughes Parkway, Paso Robles, CA 93446 • EMAIL office@pasorobleshorsepark.com • ENTRIES CLOSE Oct. 31, 2022

Office Use Only

We strongly recommend completing entries at horseshowing.com to take advantage of the NEW digital office benefits.

Horse's Name:	USEF/USHJA #:				
Breed:	Color:	Age:	Sex:	Height:	Office Use Only: [ ] Measurement Card Verified
Check Horse / Pony Size:	[ ] Small [ ] Medium [ ] Large	Microchip #:			
Owner's Name:	USEF/USHJA #:				
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM				
City:	State:	Zip:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM		
Email Address:	US Citizen: [ ] Yes [ ] No				
Phone: ( ) _____					

### Fees Due With This Entry

Stalls: \$150 x \_\_\_\_\_ = \$ \_\_\_\_\_

**Stall Discounts:** Eligible discounts will be applied at the time of check out. Competitors who are members of the USEF, U.S. Equestrian Team, or a collegiate equestrian team **PRIOR** to check out to receive discount.

Total Enclosed: \$ \_\_\_\_\_

To pay by credit card, please fill out the Credit Card Authorization form, located in this prize list and submit with this entry. Otherwise, include a check payable. Credit card and check payments will be deposited on the entry closing date.

### Other Possible Fees Due At The Show

- Late Entry Fee **\$50** (if entry is received after closing date)
- USEF Fee **\$23** (USHJA Fee **\$2**)
- Office Fee **\$6** (California Drug Fee **\$8**)
- USEF Show Pass Fee **\$45**
- USHJA Show Pass Fee **\$30** (if not a USEF and/or USHJA Member)

Trainer's Name:	USEF/USHJA #:		
Barn / Farm Name:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM		
Address:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM		
City:	State:	Zip:	US Citizen: [ ] Yes [ ] No
Email Address:	Phone: ( ) _____		

Rider 1 Name:	USEF/USHJA #:		
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM		
City:	State:	Zip:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCal #:	PCHA #:	CPHA #:

Rider 2 Name:	USEF/USHJA #:		
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM		
City:	State:	Zip:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCal #:	PCHA #:	CPHA #:

Rider 3 Name:	USEF/USHJA #:		
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM		
City:	State:	Zip:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCal #:	PCHA #:	CPHA #:

Rider 4 Name:	USEF/USHJA #:		
Address:	USEF Verify: [ ] Card [ ] SB [ ] JAS [ ] NJM		
City:	State:	Zip:	USHJA Verify: [ ] Card [ ] JAS [ ] NJM
Email Address:	US Citizen: [ ] Yes [ ] No		
USEF Birthdate: ____/____/____	NoCal #:	PCHA #:	CPHA #:

Prize Money Payee:	Address:	City:	State:	Zip:	SSN or Fed Tax ID #:
Emergency Contact (during the show) - Name:	Address:	City:	State:	Zip:	Phone: ( ) _____

**FEDERATION ENTRY AGREEMENT**

By signing a Federation-Related Document and signing this entry form as the Owner, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vendor or Exhibitor and in full of myself and my principals, representatives, successors and assigns, I agree that I am subject to the Bylaws and Rules of the United States Equestrian Federation, Inc. ("USEF") and the local rules of \_\_\_\_\_ ("Competition"). I agree to be bound by the Bylaws and Rules of the Federation and all the competition. I will accept as final the decisions of the Hearing Committee on any questions arising under the Bylaws, and agree to release and hold harmless the Federation, the Federation, their officers, directors and employees for any action taken under the Bylaws. I represent that I am eligible to enter and participate under the Bylaws, and every time I am entering or signing an affidavit, I also agree that as a condition of and in consideration of my participation under the Bylaws, I am releasing the Federation from any and all claims, demands, damages, costs, attorneys' fees, reasonable expenses and other losses of any kind that I may incur during the course of my participation in the promotion, coverage or benefit of the competition, sport, or the Federation. These releases shall not be subject to arbitration provided that they may not be used to seek a court order to prohibit another rider's timely and appropriate participation in the competition. These releases shall not be subject to arbitration provided that they may not be used to seek a court order to prohibit another rider's timely and appropriate participation in the competition. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. The USEF, Inc.

**BY SIGNING THIS ENTRY FORM, I HEREBY AGREE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO BE BOUND BY ALL APPLICABLE FEDERATION BYLAWS, RULES, AND POLICIES INCLUDING THE USEF Anti-Doping Policy and Anti-Abuse Policy (as amended), and I agree to be bound by all applicable Federation Bylaws, rules, and policies including the Federation's Anti-Doping Policy and Anti-Abuse Policy (as amended), and I agree to be bound by all applicable Federation Bylaws, rules, and policies including the Federation's Anti-Doping Policy and Anti-Abuse Policy (as amended), and I agree to be bound by all applicable Federation Bylaws, rules, and policies including the Federation's Anti-Doping Policy and Anti-Abuse Policy (as amended).**

RIDER/DRIVER/HANDLER/AULTER/LONGEUR (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

TRAINER (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

OWNER/AGENT (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

COACH (if applicable)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Aulters is a minor) \_\_\_\_\_

Emergency Contact Phone No. \_\_\_\_\_

Is Rider/Driver/Handler a U.S. Citizen: \_\_\_ Yes \_\_\_ No

### ADDITIONAL WAIVER & RELEASE FORMS

Please note that every person on the property must sign have a signed Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, groomers, etc.) with this entry form.

Office Use Only

Entry Postmarked: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount Received: \$ \_\_\_\_\_

Check #: \_\_\_\_\_ CC Transaction #: \_\_\_\_\_

**REQUIRED WAIVER & RELEASE FORM**

Please note that every person on the property must sign have a signed Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, grooms, etc.) with this entry form.



**Paso Robles Horse Park LLC & Foundation  
Release, Assumption of Risk, Waiver, and Indemnification**

**THIS DOCUMENT WAIVES IMPORTANT LEGAL RIGHTS. READ IT CAREFULLY BEFORE SIGNING.**

**I Agree**, in consideration as a competitor, participant, trainer, rider, horse owner or other to the following:

**I Agree** that I choose to participate voluntarily with my horse, as a rider, driver, handler, caulter, longeur, lessee, owner, agent or as a parent or guardian of a participant/exhibitor under 18 years of age. I am fully aware and acknowledge that horse sports involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones and head injuries, sickness and disease (including communicable diseases), trauma, pain, suffering or death (“harm”).

**I Agree** to release the Paso Robles Horse Park LLC and Foundation (Park) from any and all claims for money damages or otherwise for any harm to me or my horse and for any harm caused by me or my horse to others, even if the harm resulted, directly or indirectly, from the negligence of the Park.

**I Agree** to expressly assume all risks of harm to me, or my horse, including harm resulting from the negligence of the Park.

**I Agree** to indemnify the Park, its officers and employees and agents and to hold it harmless with respect to claims for harm to me or my horse(s) and for claims made by other for any harm caused by me or my horse(s) during any competition or while at the Park.

**I Agree** that the Park as used herein includes all of its officials, directors, employees, agents, personnel, volunteers, affiliated organizations and vendors.

**I Agree** that I shall not now or at any time in the future, directly or indirectly, prosecute any action, suit or other proceeding against the Park arising out of or relating to actions, causes of action, claims and demands hereby waived, released or discharged by me, which released claims include all which are known and unknown, foreseen and unforeseen, future or contingent. This release shall be binding upon me and my spouse, legal representatives, heirs, successors and assigns.

I represent that I have the requisite training, coaching and abilities to safely participate in competition or other events at the Park and to be bound by all of the above terms and other rules and regulations of the Paso Robles Horse Park LLC Foundation.

\_\_\_\_\_  
Participant Name - Print

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Name - Print

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

**REQUIRED WAIVER & RELEASE FORM**

Please note that every person on the property must have a signed Park Release and a signed USEF Waiver and Release of Liability prior to entering the show grounds. To expedite the entry process, please submit both waivers for all members of your group (parents, grooms, etc.) with this entry form.



**WAIVER AND RELEASE OF LIABILITY,  
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

For and in consideration of United States Equestrian Federation, Inc. dba US Equestrian ("USEF") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, official, trainer or volunteer) in a USEF sanctioned, licensed or approved event or activity, including but not limited to equestrian clinics, practices, shows, competitions and related or incidental activities and ("USEF Event" or "USEF Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors,, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "Agreement"):

A. RULES AND REGULATIONS: I hereby agree that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time.

B. ACKNOWLEDGMENT OF RISK: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any USEF Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the USEF Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks").

**EQUINE ACTIVITY LIABILITY ACT WARNING:**

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK.

**Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.**

C. ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the USEF Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any USEF Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any USEF Event.

D. WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY: In conjunction with my participation in any USEF Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: USEF, USEF Recognized Affiliate Associations, the United States Olympic & Paralympic Committee (USOPC), USEF clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any USEF Event; any charity or other beneficiary which may benefit from the USEF Event; the owners, managers, or lessors of any facilities or premises where a USEF Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (**Individually and Collectively, the "Released Parties" or "Event Organizers"**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("**Liability**") which may arise out of, result from, or relate in any way to my participation in the USEF Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

E. COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

**I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.**

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any USEF Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

**The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.**

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR  OWNER  TRAINER  OFFICIAL  STAFF  VOLUNTEER  COACH (IF APPLICABLE)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) \_\_\_\_\_ Date: \_\_\_\_\_

Print Parent//Guardian Name: \_\_\_\_\_ Emergency Contact Phone No. \_\_\_\_\_

6.17.20