



Rosé In May May 23-26, 2024

USHJA Outreach Competition Entry Form

MAIL 3801 Hughes Parkway, Paso Robles, CA 93446 • EMAIL office@pasorobleshorsepark.com • ENTRIES CLOSE May 7, 2024

Office Use Only

STALLS stalls@pasorobleshorsepark.com

We strongly recommend	d completing entries a	t horseshowing.com to take a	advantage of the N	EW digital office benefits.

Horse's Name:			Office Use Only: [] M	leasurement Card Verified	Fees Due With This Entry
Breed:	Color:	Age:	Sex:	Height:	Office Fee: \$36 per horse
Check Horse / Pony	Size: [] Small [] Mediun	ı []Large	Microchip #:		CA Drug Fee: \$14 per horse
					Stalls: \$200 x = \$
Owner's Name:			Email Address:		Stall Discounts: Elligible discounts will be applied at the time of check out. Competitors <u>MUST</u> provide proof that horse is 7 years or younger, or that the rider is a member of Pony Club,
Address:			Phone: ()		IEA, or a collegiate equestrian team PRIOR to check out to receive discount.
City:	State:	Zip:	US Citizen: [] Yes	[]No	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
Frainer's Name:			Email Address:		Otherwise, include a check payable. Credit card and check payments will be deposited on the entry closing date.
Barn / Farm Name:			Phone: ()		Other Possible Fees Due At The Show
Address:					Late Entry Fee \$50
City:	State:	Zip:	US Citizen: [] Yes	[] No	(if entry is received after entry closing date) Office Fee \$75
Rider 1 Name:			Email Address:		Sections / Classes for Rider 1
Address:			US Citizen: [] Yes	1 No	
City:	State:	Zip:	USEF Birthdate:		
USHJA Outreach Men		Zip.	OSEI Billidate.	<u>''</u>	
USHJA Outreach Men	nber verny:				
Rider 2 Name:			Email Address:		Sections / Classes for Rider 2
Address:			US Citizen: [] Yes	[] No	
City:	State:	Zip:	USEF Birthdate:	//	
USHJA Outreach Men	nber Verify:				
Rider 3 Name:			US Citizen: [] Yes	[]No	Sections / Classes for Rider 3
Email Address:			USEF Birthdate: _	_//	
USHJA Outreach Men	nber Verify:				T
Prize Money Payee:		Email A	ddress:		Office Use Only
Address:		l		SSN or Fed Tax ID #:	Office Use Only Entry Postmarked / /
City:	State:	Zip:			Amount Received: \$
· 		· 			Check #: CC Transaction #:
	(during the show) - Name:		Phone	:()	G. Con W CC Indisaction #

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DERATION ENTRY AGREEMENT

tering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, ter 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 e United States Equestrian Federation, Inc. (the "Federation") and the local rules of ROSE IN MAY 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 the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under ules. 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 ndition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable horadicasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage nefit 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 opardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensainvasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State ew York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

IGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the F Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time, as well as all s and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall the same validity, force and effect as if I affixed my signature by my own hand.

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Sipalara		
Print Harms		
TRUEL (marking)		
Signalum		
Print Harms		
DRNES/REEKT (sambiny)		
Sipatura		
Print Norm.		
(مندعبيت والالات		
Signatura		
Print Maren		
Parcel/Gaustian Signalum, popular macroscotaman resta	Engur is a minu)	
Print Percel/Guardien Maso.	Emirgacy Contact Plans lib.	
ls Ridas/Drives/Vaulier a U.S. CitizenYes 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.

REQUIRED WAIVER & RELEASE FORM

Please note that every person on the property must have a signed Paso 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 Indemnicication

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 (Paso 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 Paso Park.

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

I Agree to indemnify the Paso 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 Paso 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 Foundation.

Participant Name - Print	Participant Signature	Date
Parent/Legal Guardian Name - Print	Parent/Legal Guardian Signature	 Date