

USHJA Outreach Competition Entry Form

Name of Horse or Pony		Color	Sex	Height	Age
Number					
				PONY: S M L	
Name of Rider One		* USHJA ID#	Age	Classes (please use class numbers)	
Name of Rider Two		* USHJA ID#	Age	Classes (please use class numbers)	
Rider One Contact Information:		Rider Two Contact Information:		Owner Information:	
Name:		Name:		Name:	
Address:		Address:		* USHJA ID#:	
Email Address:		Email Address:		Address:	
Cell Phone:		Cell Phone:		Email Address:	
Signature:		Signature		Cell Phone:	
Parent/Guardian Signature:		Parent/Guardian Signature:		Signature:	
Trainer Information:		Tax Payer Information: for receipt of prize money		Fees:	
Name:		Name:		_____ Classes _____	
Address:		Address:		Office/Grounds/EMT <u> \$28 </u>	
Signature:		SSN :		Post Entry <u> \$25 </u>	
Credit Card #				Credit Card Fee (\$3 or 3%) _____	
Exp: __ / ____ CVV#		Billing Zip Code:		Total Due _____	
Name on Card					

ENTRY AGREEMENT - 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 "Competition" as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliates. I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, handler, 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 USHJA 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 USHJA 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 USHJA or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA 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 understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA 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