



St. Louis National Charity Horse Show

Hunter/Jumper Show

#317839 • SEPTEMBER 12 - 16, 2018

OFFICE USE

ENTRY #

Entries will not be accepted without signatures on the back page. Each signature indicates that the signatory has read and understands the **USEF COMPETITION AGREEMENT**.

HORSE					OWNER				
HORSE NAME (DO NOT USE BARN NAME)					NAME			USEF/USHJA#	
USHJA#	TIP#	HEIGHT	GREEN		EMAIL			PHONE #	
			1	2					
STABLE WITH		ARRIVAL DATE	HORSE / PONY		ADDRESS			CITY/ST	
			SML	MED				LRG	ZIP
PAYEE									
NAME			ADDRESS				ZIP		FED ID#/SSN
TRAINER									
NAME			USEF/USHJA #		PHONE #		EMAIL ADDRESS		
ADDRESS			CITY/ST		ZIP		enter online at: www.horseshowtime.com		
RIDER # 1					RIDER # 2				
NAME		TYPE	USEF/USHJA #		NAME		TYPE	USEF/USHJA #	
		JR / AM / PRO					JR / AM / PRO		
EMAIL			PHONE #		EMAIL			PHONE #	
@					@				
ADDRESS		CITY/ST	ZIP		ADDRESS		CITY/ST	ZIP	
WHOLE DIVISIONS			SEPARATE CLASSES		WHOLE DIVISIONS			SEPARATE CLASSES	

OFFICE FEE **\$50**
 USEF FEE **\$23**
 USHJA FEE **\$7**
 MEDIC FEE **\$20**

JUMPER NOM FEE (\$150/\$175 LATE) \$ _____
 EARLY ARR/LATE DEP (\$25/day) \$ _____

CLOSING DATE: SEPT 1, 2018

PLEASE READ & SIGN THE RELEASE AND FEDERATION AGREEMENT ON THE REVERSE SIDE OF THIS FORM.

SEND ENTRIES TO:
 Mickey Cannon
 PO BOX 597, Calhoun, LA 71225
 Fax (206) 202 - 3077
queenieshows@gmail.com

STALL FEE (\$225) \$ _____
 USEF SHOW PASS (\$45) \$ _____
 USHJA SHOW PASS (\$30) \$ _____
 RINGSIDE BOX (\$250) \$ _____
 TAILGATE SPOT (\$100) \$ _____

TOTAL PAID	\$
OFFICE USE ONLY	

CREDIT CARD # (MC,VI,DS)		EXP DATE	CODE
CARDHOLDER NAME		SIGNATURE	
		(X)	

State of Missouri Release, Assumption of Risk, Waiver, and Idemnification

By entering this Competition and signing this entry blank as the owner, lessee, trainer, manager, agent, coach, driver, rider, handler, and on behalf of myself and my principals, representatives, employees, agents, heirs and assigns, I agree that I am bound by the express provisions of Missouri's "equine liability law," as set forth in Section 537.325 RSMo. I expressly acknowledge and agree to be bound by the principle that "under Missouri law, an 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 pursuant to the Revised Statutes of Missouri." I further expressly waive all claims against the management of this Competition, including but not limited to the organizers of this event, The Lake St. Louis Exposition Park, LLC dba The National Equestrian Center, The Saint Louiis National Charity Horse Show and Queenie Productions, LLC, for any and all accident, loss and serious bodily injury, including broken bones, head injuries, trauma, pain, suffering or death. I further expressly assume all risks of harm to me or my horse, including harm resulting from negligence of the Competition management, The Lake St. Louis Exposition Park, LLC dba The National Equestrian Center, and Queenie Productions, LLC.

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, Vaultor 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 The Saint Louis National Charity Horse Show (the "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 inconsideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable-casts, broadcasts, internet, film, new media or other likenesses 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 GR908.4.

Federation 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 herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaultor, 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.

BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank and 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 1 (mandatory)	RIDER 2 (mandatory)	OWNER/AGENT (mandatory)	TRAINER (mandatory)	COACH (mandatory)
Signature: _____	Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____

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

Print Parent/Guardian Name: _____

Emergency Contact Phone No.
