

NORTH SHORE HORSEMEN'S ASSOCIATION, INC. Note: Only ONE horse accepted per entry form, which may be photocopied Other entry forms will not be accepted.								Sunday _____, 2007		POST ENTRY FEE:	# ASSIGNED
ARE YOU A MEMBER?								T.H.E. FARM AT STRONGWATER PARK			
Name of Horse		USEF. #	Meas./Am Card		Sex	Height	Color	Horse/Pony		Am. Adult Age	
								<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large	<input type="checkbox"/> 18 - 35 <input type="checkbox"/> Over 35		
Name of Rider One		Age	USEF #	ASPCA #	NEHC#	NEHC Horse #	CLASSES ENTERED			TOTAL FEES THIS SECTION	
						Class Number					
						Entry Fee					
Name of Rider Two		Age	USEF#	ASPCA #	NEHC#	CLASSES ENTERED					
						Class Number					
						Entry Fee					
I have read the USEF ("the Federation") Entry Agreement (Article 1502.4) as printed in the Prize List for the Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of this competition. I agree to waive the right the use at the competition, and agree that any actions against the Federation must be brought in New York State.								TOTAL ENTRY FEES			
USEF Release, Assumption of Risk, Waiver and Indemnification <u>This document waives important legal rights. Read it carefully before signing.</u>								USEF. Fees \$7.00 Drug Fee \$5.00 USEF Fee		\$12.00	
I AGREE in consideration for my participation in the Competition of North Shore Horsemen's Association (NSHA) to the following: I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, 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 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 caused by me or my horse to others, even if the Harm resulted, 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 made by others for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horses at the Competition. I have read the Federation Rules about protective equipment, including GR318 and EV113, 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 assume all of the obligations of this Release on the child's behalf. I AGREE that "the Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. 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. BOD 1/16/05 I represent that I have the requisite training, coaching and abilities to safely compete in this competition. BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.								USEF Non-Member Fee: \$25.00/ \$20.00 Affidavit Fee: \$5.00 Breed/Discipline Fee: \$5.00 USHJA Non-Member Fee \$20.00			
								MHC Fee		\$1.00	
								Warm-Up(s) & Post Entry			
								Number Deposit		\$1.00	
								SUB-TOTAL			
								Prize Money		<	
								GRAND TOTAL			
								(Office Use Only)			
								Amt. Rec: _____ Cash or Ch #: _____			
								WARNING			
								Under Massachusetts Law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 128, Section 2D.			

X _____ Rider's Signature	X _____ Trainer's Signature	X _____ Owner/Agent Signature
Name _____	Name _____	Name _____
Address _____	Address _____	Address _____
City _____	City _____	City _____
State/Zip _____	State/Zip _____	State/Zip _____
Phone _____	Phone _____	Phone _____
Rider's USEF. # _____	Trainer's USEF. # _____	Owner/Agent's USEF. # _____
Parent/Guardian Signature _____		Emergency Contact Phone No. _____
(Required if rider/driver/ handler/vaulter/longeur is a minor)		Coach Signature (if applicable) _____
Print Parent/Guardian Name _____		Print Coach's Name _____
Is Rider/Driver/Vaulter a U.S. Citizen: ___ Yes ___ No		