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# The Ridge at Wellington - Turf Tour

Show date: \_\_\_\_\_

**Entries Close at 12:00PM the day before the show**
**ALL EXHIBITORS MUST HAVE CURRENT USEF/USHJA MEMBERSHIP**

HORSE/PONY NAME			USEF#	USHJA#	COLOR	SEX	HEIGHT	AGE	MICROCHIP#	FEES			
										*Fees charged to all entries			
RIDER ONE NAME			USEF#	USHJA#	D.O.B	RIDER 1 CLASSES					OFFICE FEE*	\$70	
RIDER TWO NAME			USEF#	USHJA#	D.O.B	RIDER 2 CLASSES					EMT FEE*	\$40	
											USEF FEE*	\$23	
											DRUG \$15, ADMIN \$8		
											USHJA FEE	\$2	
											USEF SHOW PASS	\$45	
											USHJA SHOW PASS	\$30	
<b>OWNER</b>			<b>RIDER ONE</b>			<b>RIDER TWO</b>					SCHOOLING FEE		
NAME			NAME			NAME					STALL FEE		
ADDRESS			ADDRESS			ADDRESS					POST ENTRY	\$50	
CITY	STATE	ZIP	CITY	STATE	ZIP	CITY	STATE	ZIP	NON-SHOWING HORSE			\$100	
PHONE	USEF#	USHJA#	PHONE	USEF#	USHJA#	PHONE	USEF#	USHJA#	NOMINATION FEE			\$195	
EMAIL			EMAIL			EMAIL					ENTRY FEES		
<b>TRAINER</b>			<b>PRIZE MONEY PAYEE</b>			ON-LINE ENTRIES ACCEPTED AT <a href="http://WWW.HORSESHOWING.COM">WWW.HORSESHOWING.COM</a> EMAIL COMPLETED ENTRY BLANK TO <a href="mailto:ENTRY@RIDGESHOWJUMPING.COM">ENTRY@RIDGESHOWJUMPING.COM</a> HORSE SHOW OFFICE PHONE 561-791-1471 Please visit <a href="http://horseshowing.com">horseshowing.com</a> or <a href="http://www.ridgeshowjumping.com">www.ridgeshowjumping.com</a> for updates! Is Rider a U.S. Citizen: YES ___ NO ___					4% CREDIT CARD		
NAME			NAME								CONVENIENCE FEE		
ADDRESS			ADDRESS								TOTAL DUES\$		
CITY	STATE	ZIP	CITY	STATE	ZIP								
PHONE	USEF#	USHJA#	SSN OR TAX ID#										
EMAIL			EMAIL										

**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 Ridge at Wellington (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, 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.

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 (MAAPP) 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.

OWNER		RIDER ONE		RIDER TWO		TRAINER		EMERGENCY CONTACT	
OWNER/AGENT SIGNATURE		RIDER ONE SIGNATURE		RIDER TWO SIGNATURE		TRAINER SIGNATURE		NAME	
PRINT NAME		PRINT NAME		PRINT NAME		PRINT NAME		PHONE	
CREDIT CARD INFORMATION: PLEASE PRINT CLEARLY NOTE: A 4% CONVENIENCE FEE WILL BE ASSESSED ON ALL CREDIT CARD CHARGES									
CARD NUMBER				EXP				CID	
NAME ON CARD			SIGNATURE			CELL PHONE		BILLING ZIPCODE	