NUMBER

TREASURE VALLEY CLASSIC- FALL FINALE SEPTEMBER 28-29, 2019 ENTRIES CLOSE SEPTEMBER 18TH, 2019

OWNER
Name_____
Address_____
City, state, zip_____
Email_____
Phone_____USEF/USHJA#_____

PRIZE MONEY PAYEE
Name_____
Address_____
City, state, zip_____
Tax ID #_____

ENTRIES CLOSE SEPTEMBER 18TH, 2019
Make check payable to Boise Saddle and Jump Club, and mail to:
Kathryn Almberg C/O Treasure Valley Classic
2627 W Champagne Drive
Eagle, Idaho 83616

RIDER ONE
Name_____
Address_____
City, state, zip_____
Email_____
Phone_____USEF/USHJA#_____
ASPCA#_____BSJC#_____
Birthday_____

RIDER TWO
Name_____
Address_____
City, state, zip_____
Email_____
Phone_____USEF/USHJA#_____
ASPCA#_____BSJC#_____
Birthday_____

TRAINER
Name_____
Address_____
City, state, zip_____
Email_____
Phone_____USEF/USHJA#_____

CREDIT CARD INFORMATION Convenience Fee- $25
Name_____
Address_____
City, state, zip_____
Email_____
VISA/MC #_____
Expiration _____3 Digit Code_____
Signature_____

HORSE NAME					USHJA#	Rider One JR AM PRO	Rider 1 Classes										
Color	Sex	Ht.	Age		SML MED LRG	Rider Two JR AM PRO	Rider 2 Classes										

Federation Entry Agreement

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for this 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 the competition. I agree to waive the right to the use of my photos from the competition, and agree that any actions against the Federation must be brought in New York State.

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, 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 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 rovisions 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. If I am signing and submitting this Agreement electronically, I acknowl- edge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand. BOD 1/23/11 Effective 12/1/11

RIDER ONE SIGNATURE	OWNER/AGENT SIGNATURE	TRAINER SIGNATURE
Signature _____	Signature _____	Signature _____
Print name _____	Print name _____	Print name _____
RIDER TWO SIGNATURE	**PARENT/GUARDIAN SIGNATURE**	**COACH**
Signature _____	Signature _____	Signature _____
Print name _____	Print name_____	Print name _____

$50 Horse Show Deposit is applied to Show Grounds Fee. Please send $50 deposit with Entry prior to closing date to avoid Late Fee.

Horse Show Deposit	$50	$_____
Show Grounds Fee	$50	$_____
Non showing horse (per day)	$25	$_____
Haul-In Fee (per day)	$25	$_____
Ticketed Warm-Up Individual	$25	$_____

TOTAL ENCLOSED **$_____**