OFFICE USE ONLY

DO NOT FAX THIS FORM. WE DO NOT ACCEPT ANY FAXED ENTRIES. IF YOU FAX THEM THEY WILL NOT BE PROCESSED

## OFFICIAL ENTRY FORM

Refund and Credit Card Policy Stabling, nominating and administration fees will not be refunded under any	CHECK THE SHOW OR SHOWS YOU PLAN ON ATTENDING **CLOSING DATE IS ONE WEEK PRIOR TO THE START OF EACH SHOW**											
circumstances. Horses entered may be scratched without a veterinarian's certificate by notifying the Show Secretary in writing via letter, official scratch sheet, or other written correspondence, provided: Written notification is received before the start of competition, entry fees will be refunded, less a \$150 processing fee. We encourage you or your agent/firainer to close out your show bill in person before the end of the show However, if you do not				ONLY	LY ONE ENTRY BLANK PER HORSE FOR			E WHOLE S	ŠĔRIES	Please Mail to: CHP HORSESHOW OFFICE 7522 SOUTH PINERY DRIVE PARKER, CO 80134		
do so in person, you automatically agree to authorize Colorado Horse Park to charge your credit card for all entry fees, stabling fees, etc. If you dispute a charge made by Colorado Horse Park you may not be able to show until the charge dispute has been resolved.	CREDIT CARD			EXP  NAME ON CARD			<del>7</del> 3			PLEASE MAKE CHECKS OUT TO: COLORADO HORSE PARK		
NAME OF HORSE US		SEF NUMBER		COLOR	SEX	HEIGHT YR		FOALED	PASSPORT #			
SIRE			DAM				ST			STABLE WITH:		
RIDER ONE			USEF # BIRTH DATE					ARRIVAL DATE:				
RIDER ONE CLASSES									DEPARTURE	DEPARTURE DATE:		
RIDER TWO			USEF#		BIRTH DATE				(FEES ARE CHARGED PER WEEK) OFFICE FEE: \$50 MEDIC FEE: \$15 PERM STALL FEE: \$300			
RIDER TWO CLASSES										CLEARSPAN TENT D: \$275 TENT STALLS: \$250		
United States Equestrian Inc. 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 at the competition, and agree that any actions against the Federation must be brought in New York State. 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 above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. I AGREE that 1 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 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 in the rederation Rules with respect									s. NBANGTOWN at USEF SHOW USHJA SHO'USEF DRUG USHJA FEE:	NBANEROWNBOUNDS FEE: \$100 USEF SHOW PASS: \$30 USHJA SHOW PASS: \$30 USEF DRUG FEE: \$16 (\$8 DRUG/\$8 ADMIN) USHJA FEE: \$7		
from the negligence of the Federation or the Competition harmless with respect to claims for Harm to me or my I about protective equipment, including GR801 and, if as strongly encourages me to do so while WARNING that and AGREE to all of the above provisions and AGREE safely compete in this competition. I AGREE that if I amon the official USEF accident/injury report form. BY SIG provisions of this Prize List. If I am signing and submitting signature by my own hand. BOD 1/23/11 Effective 12/1/	on Y AGREE to indemning the process of the column of the c	fy (that is, to pay a gade by others for understand that I is can guard agains igations of this Reon, the medical pe E to be bound by ronically, I acknow	any losses, damages, any Harm caused by ra am entitled to wear pr st all injuries. If I am a elease on the child's b ersonnel treating my in all applicable Federat wledge that my electro	or costs in me or my h otective eq parent or g ehalf. I rep juries may on Rules a nic signatu	ncurred by) the lands while at the displayment without a full purchash of a just of the lands of	Federation and the le Competition. I hit t penalfly, and I act loior exhibitor, I con ve the requisite tra tion on my injury a d provisions of this e same validity, for	Competition and ave read the Fet knowledge that sent to the child ining, coaching and treatment to sentry blank and ce and effect as	d to hold ther deration Rule the Federation's participation and abilities the Federation all terms and if I affixed management.	ALL STALL I SS YOU MUST ORDER FOR ORDER FOR ORDER FOR ORDER	FEES ARE PLUS 6% TAX DECLARE CLASSES ON THIS ENTRY IN RIT TO BE CONSIDERED ON TIME. TE ENTRIES OR ENTRIES WITHOUT ALL BE CONSIDERED POST ENTRIES. SISE ON GROUNDS MUST BE OFFICIALLY IN AN ENTRY FORM, NO MONEY WILL BE WITHOUT A VETERINARY CERTIFICATE. S ARE NON-REFUNDABLE.		
RIDER #1 SIGNATURE	RIDER #2 SIGNATURI			OWNER SIG				RAINER SIGNA				
RIDER #1 NAME USEF # / FEI #	RIDER #2 NAME		USEF#7FET#	OWNER NA	ME	USEF #	7FET#	RAINER NAME		USEF #7 FEI #		
ADDRESS ADDRESS			ADDRESS				ľ	ADDRESS				
CITY/STATE/ZIP CITY/S/AIE/ZIP		CITY/STAT				ľ	CITY/STATE/ZIP					
EMAIL PHONE #	EMAIL	į.	PHONE #	EMAIL	0000000	PHONE		MAIL		PHONE #		
SOCIAL SECURITY# NATIONALITY	SOCIAL SECURITY#	1	NATIONALITY	SOCIAL SE	CURITY#	NATIONA	(LITY)	SOCIAL SECUR	RITY#	NATIONALITY		
PARENT/GUARDIAN SIGNATURE IF RIDER IS A MINOR:					PRIZE MONEY PAYEE IF DIFFERENT IF DIFFERENT FROM OWNER:  SOCIAL SECURITY NUMBER INCORPORATED YES NO							

COACH SIGNATURE \_\_\_\_

\_\_\_ COACH NAME: \_