

2018 Summer in the Rockies OFFICIAL ENTRY FORM

OFFICE USE ONLY

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

Refund and Credit Card Policy

Stabling, nominating and administration fees will not be refunded under any 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/trainer to close out your show bill in person before the end of the show. However, if you do not 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.

CHECK THE SHOW OR SHOWS YOU PLAN ON ATTENDING **CLOSING DATE IS ONE WEEK PRIOR TO THE START OF EACH SHOW**

ONLY ONE ENTRY BLANK PER HORSE FOR THE WHOLE SERIES

SIR I 6/6-10	SIR II 6/13-17	SIR III 6/20-24	SIR IV 6/27-7/1	SIR V 7/4-8	SIR VI 7/11-15	SIR VII 7/18-22
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Please Mail to:
CHP HORSE SHOW OFFICE
7522 SOUTH PINERY DRIVE
PARKER, CO 80134

PLEASE MAKE CHECKS OUT TO:
COLORADO HORSE PARK

CREDIT CARD _____ EXP. _____
SIGNATURE _____ NAME ON CARD _____

NAME OF HORSE	USEF NUMBER	COLOR	SEX	HEIGHT	YR. FOALED	PASSPORT #

SIRE	DAM	STABLE WITH: _____
RIDER ONE	USEF # _____ BIRTH DATE _____	ARRIVAL DATE: _____
RIDER ONE CLASSES		DEPARTURE DATE: _____
RIDER TWO	USEF # _____ BIRTH DATE _____	(FEES ARE CHARGED PER WEEK) OFFICE FEE: \$50 MEDIC FEE: \$15 PERM STALL FEE: \$300 CLEARSPAN TENT D: \$275 TENT STALLS: \$250 TRAILER-IN/GROUNDS FEE: \$100 NON SHOWING FEE: \$100 USEF SHOW PASS: \$30 USHJA SHOW PASS: \$30 USEF DRUG FEE: \$16 (\$8 DRUG/\$8 ADMIN) USHJA FEE: \$7 NIGHT WATCH: \$14 LATE FEE / INCOMPLETE ENTRY: \$30 JUMPER NOMINATION FEE: \$175/\$200
RIDER TWO CLASSES		ALL STALL FEES ARE PLUS 6% TAX YOU MUST DECLARE CLASSES ON THIS ENTRY IN ORDER FOR IT TO BE CONSIDERED ON TIME. INCOMPLETE ENTRIES OR ENTRIES WITHOUT CLASSES WILL BE CONSIDERED POST ENTRIES. EVERY HORSE ON GROUNDS MUST BE OFFICIALLY ENTERED ON AN ENTRY FORM. NO MONEY WILL BE REFUNDED WITHOUT A VETERINARY CERTIFICATE. STALL FEES ARE NON-REFUNDABLE.

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 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 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. BOD 1/23/11 Effective 12/1/11

RIDER #1 SIGNATURE _____		RIDER #2 SIGNATURE _____		OWNER SIGNATURE _____		TRAINER SIGNATURE _____	
RIDER #1 NAME	USEF # / FEI #	RIDER #2 NAME	USEF # / FEI #	OWNER NAME	USEF # / FEI #	TRAINER NAME	USEF # / FEI #
ADDRESS		ADDRESS		ADDRESS		ADDRESS	
CITY/STATE/ZIP		CITY/STATE/ZIP		CITY/STATE/ZIP		CITY/STATE/ZIP	
EMAIL	PHONE #	EMAIL	PHONE #	EMAIL	PHONE #	EMAIL	PHONE #
SOCIAL SECURITY #	NATIONALITY	SOCIAL SECURITY #	NATIONALITY	SOCIAL SECURITY #	NATIONALITY	SOCIAL SECURITY #	NATIONALITY

PARENT/GUARDIAN SIGNATURE IF RIDER IS A MINOR: _____
EMERGENCY CONTACT NUMBER: _____

PRIZE MONEY PAYEE IF DIFFERENT FROM OWNER: _____
SOCIAL SECURITY NUMBER _____ INCORPORATED YES NO

COACH SIGNATURE _____ COACH NAME: _____