

Stabling Information & Special Requests

Number of stalls (horse) needed: _____	Arriving: _____
Number of stalls (grooming) needed: _____	
Number of tack stalls needed: _____	Departing: _____
Stable with: _____	USE ONE NAME FOR ALL IN GROUP



I hereby agree to release, indemnify and hold harmless USDF, its instructors, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of or in connection with , participation in this competition or related activities. I also hereby agree to release, indemnify and hold harmless the competition , licensee, show management, competition staff, show committee, and members, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with participation in this competition or related activities.



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 _____ (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.

If not currently a USEF Active Competing member or Subscriber, I acknowledge that I will be enrolled for no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew in USEF's sole discretion. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. USEF may in its sole discretion, at any time, terminate my USEF Fan status. I acknowledge that I may opt out at any time by going to My USEF Dashboard or calling (859) 810-8733.

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, 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.

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)

Signature: _____
 Print Name: _____

TRAINER (mandatory)

Signature: _____
 Print Name: _____

OWNER/AGENT (mandatory)

Signature: _____
 Print Name: _____

COACH (if applicable)

Signature: _____
 Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultor/Longeur is a minor) _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____

Is Rider/Driver/Vaultor a U.S. Citizen: Yes No

Make checks payable to:
Dressage Association of Southern California
Email:
eqconcepts@earthlink.net

Mail:
Equestrian Concepts
5089 Flagstone Lane
Simi Valley, CA 93063

CHECK ONE:	VISA	MASTERCARD	DISCOVERY
Credit Card #:	_____		
Signature	_____		
Name on Card:	_____		exp. Date: / /
Billing Street Address:	_____		
	Zip code:		_____