

Mail Entries to:  
Dottie Los  
427 Sarver Rd  
Sarver, PA 16055

Sewickley Hunt  
Outreach Entry  
June 20, 2021

Number

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Horse's Name	Horse's USHJA #	Sex	Size	Color	Stable With
<b>OUTREACH RIDERS ONLY</b>					
Write in Individual Class Numbers					
Rider 1					
Rider 2					

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 "USHJA" 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 a 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 USHJA 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 USHJA 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 USHJA or the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA 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 USHJA 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 USHJA 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 USHJA on the official USEF accident/injury report form. BY SIGNING BELOW, I AGREE to be bound by all applicable USHJA 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.

Owner/Agent USEF # _____ Owner/Agent _____ Street Address _____ City/State/Zip _____ Phone # _____ SS#/TIN# _____ Name Associated with SS/TIN _____ Owner/Agent Signature _____	Trainer USEF # _____ Trainer _____ Street Address _____ City/State/Zip _____ Phone # _____ Trainer Signature _____ Coach _____ USEF # _____ Coach Signature _____	Horse Stalls \$95.00 Tack Stalls \$ 95.00 Schooling \$20.00 EMT Fee \$15.00 USEF Drug Testing Fee (D&M \$15.00 USEF \$8.00) Exempt USHJA Zone Support Fee (National \$7.00 Regional \$2.00) Exempt Show Pass (not available for amateur classes) USEF \$45.00 USHJA \$30.00 Exempt Shaving, Hay , Non Showing, Misc. Class Fees USHJA OUTREACH Fee \$2.00 Total Amount Due Amount Paid <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Credit Card
Rider # 1 _____ DOB _____ USEF # _____ Street Address _____ City/State/Zip _____ Rider/Agent Signature _____ Parent Signature (for Junior riders) _____ Emergency Contact # _____	Rider # 2 _____ DOB _____ USEF # _____ Street Address _____ City/State/Zip _____ Rider/Agent Signature _____ Parent Signature (for Junior riders) _____ Emergency Contact # _____	