



CLASSES ENTERED – Class changes are allowed during the show.											FEES:	SHOW #

<b>Fees:</b>	<b>Total Class Fees</b>	_____
USEF Fee (Drugs & Meds, USEF): \$15	_____ \$15 _____	
VHJA N/M & Trainer N/M & Number/Award Fees:	___\$5 / \$2___	
Stabling: (Day Stall \$40) or (Weekend Stabling \$80)	_____	
Shavings: _____ bags@\$8/bag	_____	
<b>WARM UPS</b> A, B, C, D, E, F, G (circle) \$20 each	_____	
Other Fees (\$30 Post Entry and/or \$25 Incomplete Entry Fee)	_____	
	<b>Office Fee</b>	_____ \$10 _____
	<b>Total enclosed</b>	_____
	<b>Make Check Payable to Summerfield Farm</b>	

**CLASS FEES**

\$20 - Unjudged Warm-Up  
 \$20 – Leadline/Beginner/Adv. Beg. Classes  
 \$30 -- NEHC Open Pleasure Horse Class  
 \$35 – VHJA Medal Classes  
 \$40 – All Other Medal Classes  
 \$25 -- All Other Individual Classes  
 \$60 -- Hunter/Jumper Divisions

If measuring is required **please notify Show Manager 48 hours in advance.**  
 Measuring will take place Saturday 10-11A Appox.

OFFICE USE ONLY

Coggins       Rabies

Signatures

**Payment Information**

Cash \_\_\_\_\_

Check# \_\_\_\_\_

Balance \_\_\_\_\_

**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 the Federal 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.

**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 Summerfield Farm Horse Show to the following: **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 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 caused by me or my horse to others, even if the Harm resulted, 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 at the Competition. I have read the Federation Rules about protective equipment, including GR801 and EV113, 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. AGREE that "the Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. 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.**

Rider (mandatory)	Owner/Agent (mandatory)	Trainer (mandatory)	Coach (if applicable)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
		<b>VHJA T#</b> _____	<b>USEF#</b> _____

**Parent/Guardian Signature (Required if Rider is a minor):** \_\_\_\_\_ **Print Parent/Guardian Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_ **Is Rider/Driver/Vaulter a U.S. Citizen:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Under Vermont Law, an equine activity sponsor is not liable for an injury to, or the death of a participant pursuant to 12.V.S.A. Section 1039.**  
**Please send your completed entry to: Cathy Muskus 1147 East Rd Colchester, Vermont 05446 Phone (802) 878-9775**