

OWNER/AGENT		
Name		
Address		
City/State/Zip		
Phone ( )	USEF/USHJA #	
Email	PCHA#	NORCAL#
SS# - - - or FED ID# - - -		

# Northern Winter Classic II

February 20 - 24, 2019

PRIZE MONEY PAYEE (if different than Owner/Agent)	
Payable To	
Address	
City/State/Zip	
SS# - - - or FED ID# - - -	

TRAINER/COACH		
Name		
Address		
City/State/Zip		
Phone ( )	USEF/USHJA #	
Email	PCHA#	NORCAL#
Stable With		

RIDER ONE (1) INFORMATION					
Name			Amateur - Circle Age 18-35 36&O		
Address			Jr - Birthdate		
City/State/Zip			US Citizen? (Circle one): YES NO		
Email	USEF/USHJA #	PCHA#	NORCAL#		

RIDER TWO (2) INFORMATION					
Name			Amateur - Circle Age 18-35 36&O		
Address			Jr - Birthdate		
City/State/Zip			US Citizen? (Circle one): YES NO		
Email	USEF/USHJA #	PCHA#	NORCAL#		

NAME OF HORSE						HORSE USHJA #	RIDER	CLASS NUMBERS ENTERED																												
							1																													
Color	Age	Sex	Height	Green Status	Microchip#							2																								

**United State Equestrian 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 Northern Winter Classics I, II, III, IV ("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 from 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 to the following:  
 I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation Affiliates  
 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 a parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sport sand 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 to my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results 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 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 obligation 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 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.**

**STALL, OPEN ARENA & REGISTRATION FEE DUE WITH ENTRY**

Open Arena Fee	\$50
Registration Fee	\$65
Horse Stalls	\$275
Tack Stalls	\$275 x _____
RV Space	\$250 x _____
Late Fee	\$50 x _____
Jumper Nomination	\$50

**ASSOCIATION FEES**

USEF Horse Fee	\$8	PCHA Fee	\$3
USHJA Zn10 Fee	\$7	Norcal Fee	\$3
USEF Show Pass	\$45	CA Drug Fee	\$5
USHJA Show Pass	\$30	USEF Drug Fee	\$15

OWNER (Mandatory)	RIDER/HANDLER 1 (Mandatory)	RIDER/HANDLER 2
Signature:	Signature:	Signature:
Print Name:	Print Name:	Print Name:
TRAINER/COACH (Mandatory)	PARENT/GUARDIAN (if Rider 1 is a minor)	PARENT/GUARDIAN (if Rider 2 is a minor)
Signature:	Signature:	Signature:
Print Name:	Print Name:	Print Name:

**Make checks payable to:**  
**FoxFarms, Inc.**  
**P.O. Box 1402**  
**Rancho Murieta, CA 95683**  
  
 Entries Close:  
**January 29, 2019**  
  
 Questions:  
**(916) 305-8898**

<b>Credit Card Information:</b> <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> Master Card <input type="checkbox"/> American Express	Name on Card: _____	Billing Address: _____	Authorized Signature _____
	Credit Card # _____	Exp Date _____ CVC Code _____	
<b>I authorize FoxFarms, Inc. to charge my credit card for all amounts due with respect to this entry.</b> -----			