

ENTRIES CLOSE OCTOBER 8, 2010

DevonWood Debut October 16-17, 2010
 25033 SW Pacific Hwy., Sherwood, OR 97140

#

OWNER or authorized AGENT

RIDER

TRAINER

Name _____
 Address _____
 City/St/Zip _____
 Ph#: _____
 Email: _____
 USEF/USHJA#: _____

RIDER #1
 Name _____
 Address _____
 City/St/Zip _____
 Ph#: _____ Birthday: _____
 Email: _____
 USEF/USHJA#: _____ OHJA#: _____
 ASPCA#: _____

Name _____
 Address _____
 City/St/Zip _____
 Ph#: _____
 Email: _____
 USEF/USHJA#: _____

PRIZE MONEY PAYEE

Name _____
 Address _____
 City/St/Zip _____
 SS# or TIN # _____

RIDER #2
 Name _____
 Address _____
 City/St/Zip _____
 Ph#: _____ Birthday: _____
 Email: _____
 USEF/USHJA#: _____ OHJA#: _____
 ASPCA#: _____

EMERGENCY PHONE NUMBER:

NAME/NUMBER:

**PLEASE REMEMBER TO SEND COPIES OF MEMBERSHIP
 CARDS AND MEASUREMENT CARDS WITH ENTRIES**
 FOR ONLINE ENTRIES GO TO
WWW.HORSESHOWTIME.COM

NAME OF HORSE

RIDER

CLASSES

NAME OF HORSE						RIDER		CLASSES						
						RIDER 1								
USEF/USHJA#	AGE	COLOR	SEX	HEIGHT	1 ST YR SM MD LG	2ND YEAR LG	RIDER 2							

I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for DevonWood Debut ("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.

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 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.

OWNER/AGENT

Print name _____ Signature _____

PARENT/GUARDIAN OF MINOR

Print Name _____ Signature _____

RIDER one

Print Name _____ Signature _____

TRAINER/COACH

Print Name _____ Signature _____

RIDER two

Print Name _____ Signature _____

ENTRIES CLOSE OCTOBER 8, 2010

Make checks payable to Franklinshow
 and mail to: P.O. Box 1655
 Lake Oswego, OR 97035

- DAY STALLS @ \$50
 No over night stay 2 day maximum
- STALLS/TACK ROOMS @ \$135
 Friday & Saturday night
- SPECIAL STALLS (see prize list)
 Friday thru Sunday only
- SCHOOLING/GROUNDS FEE @ \$30
- USEF FEE @ \$15
 (\$8 USEF/\$7 D&M)
- USHJA Zone Fee @ \$2
- USEF N/M Fee @ \$30
- USHJA N/M Fee @ \$30
- NON-SHOWING Horses @ \$25
- RV HOOK UP \$100 weekend
- For RVs and horse trailers w/living quarters only
- TOTAL FEES INCLUDED _____