

73th ROCK CREEK HORSE SHOW

June 8 – 12, 2010

Entries close May 19, 2010

One Horse per entry Blank
Make checks payable to:
Rock Creek Horse Show

Mail To: Rock Creek Horse Show
65 Old Taylorsville Rd
Shelbyville, KY 40065
Phone (502) 647-0076 or Fax (502) 633--6207

PLEASE PRINT OR TYPE (Fill out completely)

Owner _____ USEF # _____ ASHA# _____

Address _____ City/State/Zip _____

Phone # _____	Cell Phone # _____	email _____
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Trainer _____ USEF # _____ ASHA# _____

Address _____ City/State/Zip _____

Phone # _____ Cell Phone # _____ email _____

Make Checks payable to: _____ Social Security /Tax ID# _____

Address _____ City/State/Zip _____

Emergency Contact Phone Number _____

Office use	Horse Name	Registration #	USEF #
Color	Sex	Age	Height
Class #			Total Fees
Entry Fee			
Rider		USEF #	UPHA#

TOTAL ENTRY FEES	\$			
STALLS AT \$115.00 EACH	\$			
ONE NIGHT STALL @ \$50.00 (CIRCLE NIGHTS) W – TH – F - S	\$			
USEF DRUG FEE \$15.00 PER HORSE (\$7 drug & \$8 USEF)	\$			
USEF NON-MEMBER FEE - ADULT/JUVENILE \$30.00	\$			
USEF AMATEUR NON-MEMBER FEE - \$30.00	\$			
OFFICE FEE PER HORSE	\$ 15.00			
EXHIBITOR BADGES @ \$30.00	\$			
TRAINERS SPECIAL PARKING @ \$50.00	\$			
BOX SEATS (6 SEATS PER BOX @ \$300)	\$			
BOX SEATS (3 SEATS PER BOX @ \$150)	\$			
TOTAL REMITTANCE	\$			
<table border="1" style="width:100%"> <tr> <td style="width:25%">Visa or Master Card</td> <td style="width:45%">Card Number</td> <td style="width:30%">Expiration Date</td> </tr> </table>	Visa or Master Card	Card Number	Expiration Date	
Visa or Master Card	Card Number	Expiration Date		
Card Holder Name & Phone Number				

USEF ENTRY AGREEMENT ON THE BACK MUST BE SIGNED. Signed: YES NO

CHECK # _____ AMOUNT _____ DATE RECEIVED _____

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 Federation Rules, 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 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** 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 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.

Sign for rider, owner, and trainer.	SIGNATURE	PRINT NAME
Rider/Driver/Handler (mandatory)		
Owner/Agent (mandatory)		
Trainer (mandatory)		
Coach (if applicable)		
Parent/Guardian (required if rider, driver, Handler Vaulter/Longeur is a minor)		

Parent Emergency Contact Phone No. _____

Rider/Driver/Vaulter a U.S. Citizen:

Yes No

