Entry Form



Number	

DOB

Class Numbers

	-Gosnen, NY-				
Rider				Pd check	
_		Height			
Horse				Pd cash	
		le To:	Intials		
-		Old Field Farm LLC		Total	

Release, Assumption of Risk, Waiver and Indemnification:

This Document Waives Important Legal Right. Read Carefully Before Signing!

I agree in consideration for my participation in this Competition to the following:

- Every entry at this show shall constitute and agreement that the person making it, along with the owner, lessee, trainer, manager, agent, coach, driver, rider and the horse agree It is further understood that all riders must wear a helmet that is ASTM/SEI approved while mounted, with chin strap clipped. It is the responsibility of the person signing to enforce the law.
- I agree and further understood that the entry to this horse is a boarder at Old Field Farm, LLC for the time they are at and entered in the show.
- I agree that I choose to participate voluntarily in the Competition with my horse as a rider, driver, handler, vaulter, lougeur, lessee, owner, agent, coach, trainer, or as parent and guardian of a junior exhibitor. I am fully aware of and acknowledge that horse sports and 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, Old Field Farm, LLC, and their officials, assigns, families and employees 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 negligence of the Federation or the Competition and to hold harmless for any injury or loss suffered during or in connection with the show.
- 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 and harm caused by me or my horse at the competition.
- I have read the Federation Rules about protective equipment, including GR801 and 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 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 assume all of the obligation of the release on my child's behalf.
- ♦ I Agree that "The Federation" and Competition and Old Field Farm, LLC, as used above includes all the officials, officers, directors, employees, agents personnel, volunteers and affiliated organizations. Affiliated organizations to include but not limited too, NEHC, OCHFC, HVHS, Marshall & Sterling League, and Old Field Farm LLC.
- 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.
- I represent that I have requisite training, coaching and abilities to safely compete in this competition

Read Carefully Before Signing!

	Rider/Handler	Owner/Agent	Trainer/Coach		Parent/Guardian	
Signature						
PRINT						
Rider/Owners Address			, City	, State	, Zip	
E-mail						
	ber & Name of Emergence Number	ey contact while at this show _	Emergency Phone Nu	mber and Name	of that person	