

Back #	Name of Horse	USEF #	Color	Sex	Ht.	Age	Green Year	Horse/Pony	Entry Fees:
							1st 2nd	Sm Md Lg	Classes: \$
Name of Rider #1		Age	USEF #	Classes:					Schooling Fee: \$ 10.00 <small>\$10 each</small>
Name of Rider #2		Age	USEF #	Classes:					USEF Fee: \$ 23.00 <small>(\$8)USEF / (\$15)Drug Fee</small>
Owner or Authorized Agent			Rider # 1			Trainer			USEF - \$45 each <small>Show Pass Fee</small> \$
Owner's Name:			Rider Name:			Trainer Name:			USHJA - \$30 each <small>Show Pass Fee</small> \$
Address:			Address:			Address:			USHJA <small>Zone Support Fee</small> \$ 2.00
Phone #:			Phone #:			Phone #:			Office Fee: \$ 20.00
Owner USEF #:			Rider USEF #:			Trainer USEF #:			Post Entry Fee \$ <small>\$ 25 fee</small>
Recipient of Prize Money Awards <input checked="" type="checkbox"/>			Name of Individual/Corporation:						\$
SSN or Tax ID:			Address:						\$
									TOTAL FEES: \$

YES, I would like to receive emails about future CJL Events. Email Address: _____

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

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 above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaultor, 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 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.

Rider (Mandatory)	Owner/Agent (Mandatory)	Trainer (Mandatory)	Coach (If applicable)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Is Rider a U.S. Citizen? YES NO			

Parent / Guardian Signature: (required if Rider is a minor): _____

Parent / guardian Print Name: _____

Emergency Contact Phone No: _____

Credit Card Payments:

Mastercard Discover
 VISA AMEX

Card Account Number _____

Expiration Date _____ Credit Card CVV# _____

Name on Card _____

Cardholder Signature _____

INDIVIDUAL MEMBERSHIP APPLICATION

UNITED STATES HUNTER JUMPER ASSOCIATION



MEMBER INFORMATION

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone Day: () _____

Phone Evening: () _____

Fax: () _____

E-mail: _____

USEF/USHJA # _____

Date of Birth: _____

Required for Juniors (Under 18 Years of Age)

USEF Primary Designation (Circle One): **Hunter** or **Jumper**

If you are 18 years of age or older (Circle One):

Amateur or **Professional**

By submitting this application and membership dues, you agree to uphold USHJA's Membership Code of Conduct

USHJA In Stride Magazine is a member benefit.

\$9.00 of your membership dues include a one year subscription to USHJA Magazine.

Signature: _____

Date: _____

PAYMENT INFORMATION. DO NOT DETACH.

TOTAL AMOUNT ENCLOSED: \$ _____ . _____

PLEASE DO NOT SEND CASH (Make Check Payable to: United States Hunter Jumper Association).

Check # _____ Visa Master Card AMEX Discover

Card Number: _____

Exp. Date: ____/____/____

Card Holder's Name (Print) _____

Billing Zip Code _____

Card Holder's Signature: _____

MEMBERSHIP CATEGORIES

USHJA allows only one membership per year. Competing memberships include the benefits of all other memberships.

COMPETING MEMBERSHIPS

Active Member

In order to compete as a rider, trainer, owner, or his/her agent(s) at non-breed restricted USEF-licensed competitions in any Hunter, Hunter Breeding, Jumper or Hunter Seat Equitation classes, a person must be a member of the United States Hunter Jumper Association, Inc. or pay a non-member fee to the United States Hunter Jumper Association, Inc. Exceptions: Local competitions and the exceptions in GR202.1 and GR901.9.

3 Year Active Member \$ 195 _____
 (Effective through 11/30/2016)

Active Member \$ 70 _____
 (Effective through 11/30)

Life Member \$ 1500 _____

NON-COMPETING MEMBERSHIPS

Associate Member

Those individuals not competing in USEF licensed competitions who receive all other benefits of USHJA membership for the year. Please note: Associate members are subject to USHJA non-member fees if competing in USEF licensed competitions.

Associate Member \$35 _____
 (Effective through 11/30)

Outreach Member

Those individuals competing in classes that qualify for the Affiliate Equitation Awards Program and receive some of the other benefits offered by USHJA for the membership year. Please note: Outreach members are subject to USHJA non-member fees if competing in USEF licensed competitions.

Outreach Member \$15 _____
 (Effective through 11/30)

Collegiate Member

Collegiate Members are those riders or coaches participating in IHSA/USHJA competitions. The membership year runs from September 1 to August 31. Please note: Collegiate members are subject to USHJA non-member fees if competing in USEF licensed competitions.

Collegiate Alumni \$ 15 _____
Collegiate Coach \$ 35 _____

I would like to contribute \$ _____ to the USHJA's Building for Growth Capital Campaign, dedicated to raising funds for USHJA's new headquarters at the Kentucky Horse Park in Lexington, KY.

TOTAL AMOUNT \$ _____

Privacy Statement: You have the right to restrict the releasing of your personal information to others.

Please check the boxes you do not wish to have released to other USHJA members:

Name Address Telephone Email

Please check the boxes you do not wish to have released for promotion purposes:

Name Address Telephone Email

Category which best describes your participation (check one):

Owner Licensed Official Rider Manager Trainer
 Breeder Secretary Hunter Course Designer

PROTECT

YOUR PASSION



You expect a lot from your horse. You want performance and response when you ask for it, and agility and grace in the toughest of circumstances. At **Marshall & Sterling Insurance**, we think you should expect the same qualities in your insurance agent. Our Equisport Division was created by insurance professionals to meet the demands of horse owners, whether you are a competing pro, a dedicated amateur, or you just love horses.

We know why you buy insurance. **It's our business.**

EQUISPORT DIVISION

NEW YORK FLORIDA CALIFORNIA MICHIGAN VIRGIN ISLANDS



Joseph Norick
 805-338-0099
 jnorick@marshallsterling.com

Marshall & Sterling
 INSURANCE
 www.marshallsterling.com

Don Graves
 800-432-1215
 dgraves@marshallsterling.com

• **CJL, INC.** •

WWW.CJLFARM.COM

Mail Application and payment to:

UNITED STATES HUNTER JUMPER ASSOCIATION, INC. • 3870 CIGAR LANE • LEXINGTON, KY 40511 • PHONE: 859.225.6700 • FAX: 859.258.9033 • WWW.USHJA.ORG

OUTREACH ENTRY FORM

CJL, Inc. Fax: 732-987-6790

Please make check payable to: CJL, Inc

SHOW DATE:

Back #	Name of Horse	USEF #	Color	Sex	Ht.	Age	Green Year	Horse/Pony	
							1st 2nd	Sm Md Lg	
Name of Rider #1		Age	USEF #	Classes:					
Name of Rider #2		Age	USEF #	Classes:					
Owner or Authorized Agent				Rider # 1			Trainer		
Owner's Name:				Rider Name:			Trainer Name:		
Address:				Address:			Address:		
Phone #:				Phone #:			Phone #:		
Owner USEF #:				Rider USEF #:			Trainer USEF #:		
Recipient of Prize Money Awards <input checked="" type="checkbox"/>				Name of Individual/Corporation:					
SSN or Tax ID:		Address:							

Entry Fees:	
Classes:	\$
Schooling Fee: <small>\$10 each</small>	\$ 10.00
Office Fee:	\$ 20.00
Post Entry Fee <small>\$ 25 fee</small>	\$
USHJA Outreach Fee	\$ 2.00
TOTAL FEES:	\$

Credit Card Payments:

Mastercard Discover
 VISA AMEX

Card Account Number _____

Expiration Date _____ Credit Card CVV# _____

Name on Card _____

YES, I would like to receive emails about future CJL Events. Email Address: _____

USHJA OUTREACH ENTRY AGREEMENT

By entering this OUTREACH COMPETITION and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Rules of The CJL FARM INC. rules and regulations and the local rules of the competition. I will accept as final the decision of the management on any question arising under the Rules, and agree to release and hold harmless the competition, CJL FARM INC., their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, CJL FARM, INC. and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. 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 "CJL FARM INC" 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, vaultor, 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 CJL FARM INC., 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 CJL FARM INC. 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) CJL FARM INC. 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 Rules AND REGULATIONS about protective equipment, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that CJL FARM INC. 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 CJL FARM INC office staff. BY SIGNING BELOW, I AGREE to be bound by all applicable competition rules and all terms and provisions of this entry blank 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.

OWNER: _____ RIDER: _____ TRAINER: _____

SIGNATURE: _____ SIGNATURE: _____ SIGNATURE: _____

PRINT NAME: _____ PRINT NAME: _____ PRINT NAME: _____

PARENT/GUARDIAN _____ PARENT/GUARDIAN: _____
SIGNATURE (required if rider is a minor) PRINT NAME