

Cavallo Equestrian Center Horse Show							Date: _____		POST ENTRY	# ASSIGNED	
Note: Only ONE horse accepted per entry form, which may be photocopied.											
Name of Horse		Age	Meas/Am#	Horse ID or Recording #		Sex	Height	Color	Horse/Pony		Am. Ad. Age
									<input type="checkbox"/> Small <input type="checkbox"/> Med <input type="checkbox"/> Large		<input type="checkbox"/> 18 - 35 <input type="checkbox"/> Over 35
Rider #1 Name		Age	USEF #	ASPCA #	NEHC #	MHC #	CLASSES ENTERED				Total Fees
							Class #				
							Class #				
Rider #2 Name		Age	USEF #	ASPCA #	NEHC #	MHC #	CLASSES ENTERED				Total Fees
							Class #				
							Class #				
Release, Assumption of Risk, Waiver and Indemnification <u>This document waives important legal rights. Read it carefully before signing.</u> I AGREE in consideration for my participation in this Competition Cavallo Equestrian Center to the following: I AGREE that the "Competition" as used herein includes the License and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and 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 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 Competition and the New England Horsemen's Council 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 Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) 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 of applicable, EV114, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me that I 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. BY SIGNING BELOW, I AGREE to be bound by all 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.										TOTAL ENTRY FEES	
										NEHC Fee	\$2.00
										Office Fee	\$15.00
										Warm - Up(s)	\$25.00
										# Deposit	\$1.00
										SUB TOTAL	
										Prize Money	< >
										GRAND TOTAL	
										Office Use Only Below	
										Amt. Rec: _____	
										Ck #/Cash _____	
										Mail Entries to :	
										Chris Phaneuf 42 Eighth Street, Unit 2511 Charlestown MA 02129	
										Email Entries to: cmphaneuf2@gmail.com	
X _____ Riders Signature		X _____ Trainers Signature		X _____ Owner/Agent Signature							
Name _____		Name _____		Name _____							
Address _____		Address _____		Address _____							
City _____		City _____		City _____							
State/Zip _____		State/Zip _____		State/Zip _____							
Phone _____		Phone _____		Phone _____							
Riders USEF # _____		Trainers USEF # _____		Owner/Agent USEF # _____							
X _____ Parent/Guardian Signature		Print Name : _____				Emergency Phone _____					
(Required if rider/driver/handler is a minor)											
Riders Email _____				Coach Signature _____							
Trainers Email _____				Print Name _____							