

**SUSSEX COUNTY HORSE SHOW SERIES**

**SHOW DATE:**

Back #	Name of Horse	USEF #	Color	Sex	Ht.	Age	Green Year	Horse/Pony	Entry Fees:	
							1st 2nd	Sm Md Lg	<b>Classes:</b> \$	
<b>Name of Rider #1</b>		<b>Age</b>	<b>USEF #</b>	<b>Classes:</b>						<b>Schooling Fee:</b> \$ 15.00 \$15 each
<b>Name of Rider #2</b>		<b>Age</b>	<b>USEF #</b>	<b>Classes:</b>						<b>USEF Fee:</b> \$ 23.00 (\$8)USEF / (\$15)Drug Fee
<b>Owner or Authorized Agent</b>			<b>Rider # 1</b>			<b>Trainer</b>			<b>USEF - \$45 each</b> Show Pass Fee \$	
<b>Owner's Name:</b>			<b>Rider Name:</b>			<b>Trainer Name:</b>			<b>USHJA - \$30 each</b> Show Pass Fee \$	
<b>Address:</b>			<b>Address:</b>			<b>Address:</b>			<b>USHJA</b> Zone Support Fee \$ 2.00	
<b>Phone #:</b>			<b>Phone #:</b>			<b>Phone #:</b>			<b>Office Fee:</b> \$ 25.00	
<b>Owner USEF #:</b>			<b>Rider USEF #:</b>			<b>Trainer USEF #:</b>			<b>NO POST ENTRIES ACCEPTED</b>	
<b>Recipient of Prize Money Awards</b> ☒			<b>Name of Individual/Corporation:</b>							
<b>SSN or Tax ID:</b>		<b>Address:</b>							<b>Stall Fee</b> \$ 35 Night / \$ 25 Day Only \$	
									<b>Camper Hookup</b> \$ 25 Night \$	
									<b>TOTAL FEES:</b> \$	

**YES, I would like to receive emails about future SCHS Events.** Email Address: \_\_\_\_\_

Please make check payable to: **Sussex County Horse Show**

***ALL PRE ENTRIES CLOSE THE WEDNESDAY BEFORE THE SATURDAY SHOWS AND THE SUNDAY BEFORE THE 2 WEEKDAY SHOWS IN AUGUST***

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 Sussex County Benefit Shows (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.

**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.

**Credit Card Payments:**

Mastercard     Discover  
 VISA             AMEX

Card Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Credit Card CVV# \_\_\_\_\_

Name on Card \_\_\_\_\_

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):** \_\_\_\_\_

**See Current Biosecurity Req's @ [SussexCountyHorseShow.org](http://SussexCountyHorseShow.org)**

**Parent / guardian Print Name:** \_\_\_\_\_

**Emergency Contact Phone No:** \_\_\_\_\_