## **Washington International Horse Show**

October 21-26, 2014 Entries must be postmarked by September 2, 2014

## ONLINE ENTRIES www.ShowManagementSystem.com

MAIL ENTRIES TO: Washington International Horse Show 3299 K Street, NW, Suite 600 Washington, DC 20007

## CREDIT CARD FORM ON REVERSE

Horse N	lame							U	SEF#				Color		Sex	Heigh	nt	Year	Foaled	Gr	een Year	] ]	Rider Bir	th Date	
																				1	2				
CHECK	Green	Reg	Green	Green	High	A/O	A/O	3'3" A/O	3'3" A/O	Small	Small	Large	Large	Small	Med	Large	BCR	BCR	WIHS	WIHS	WIHS	WIHS	Low	High	INTL
BOXES	Conf	Conf	Hunter	Hunter	Perf	Hunter	Hunter	Hunter	Hunter	Junior	Junior	Junior	Junior	Pony	Pony	Pony	Pony	Horse	Champ	Champ	Champ	Champ	Jr/A-O	Jr/A-O	Jumper
FOR	Hunter	Hunter	1st YR	2 <sup>nd</sup> YR	Hunter	18-35	36+	18-35	36+	15/U	16-17	15/U	16-17						Child	Adult	Child	Adult	Jumper	Jumper	
SECTION																			Hunter	Hunter	Jumper	Jumper			
BECTION																									
																								1	

I have read the USEF Entry Agreement (GR 90.6.4) 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, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos from 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 the Washington International Horse Show to the following: I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Washington International Horse Show 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 Washington International Horse Show 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, the Washington International Horse Show Association, Ltd., DC Arena L.P. (Verizon Center), and Prince George's Equestrian Center from all claims for money damages or otherwise for any Harm to me or my horse and for any harm to me or my horse with respect to reduction, and Prince George's Equestrian Center. 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 Washington International Horse Show. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Washington International Horse Show. I, I am to hold them harmless with respect to claims for Harm to me or my horse, each for claims made by others for any Harm caused by me or my horse

the same validity, force and effect as if I affixed my signature by my own hand.	1							
Owner	Rider 1	Trainer						
Signature:	Signature:	Signature:						
Owner USEF#:	Rider 1 USEF#:	Trainer USEF#:						
Name:	Name:	Name:						
Address:	Address:	Address:						
City/State/Zip:	City/State/Zip:	City/State/Zip:						
SS#/TIN#:	Email Address:	Phone: Fax:						
Corporation:   Yes   No		Email Address:						
Email Address:		ENTRY SUBMISSION						
ALTERNATE PRIZE MONEY PAYEE THE PERSON TO WHOM	Rider 2							
THE PRIZE MONEY WILL BE DISPERSED (IF NOT OWNER)	Signature:	- Enclose \$155 with this form (\$150 application fee + \$5						
Name:	Rider 1 USEF#:	entry processing fee) for each horse entered (non-refundable)  - Enclose check or credit card authorization form (on reverse)  (US Funds only)  - One check per entry blank made payable to Washington International Horse Show (open checks not accepted)  - All entries must be completed in full and signed before sending  - Online entries: www.ShowManagementSystem.com  - Do NOT enclose entry or stabling fees. Invoices for these,						
Address:	Name:							
City/State/Zip:	Address:							
Phone:	City/State/Zip:							
SS#/TIN#:	Email Address:							
EMERGENCY CONTACT INFORMATION	RESERVE STABLING WITH:							
Name:		USEF and any other fees will be sent with your acceptance						
Number:		notification.						
Please circle below the individual to receive acknowledgement:	And indicate to be sent by							
Owner Rider Trainer	EMAIL or Postal Mail	Entries must be postmarked by September 2, 2014						
Parent/ Guardian Signature (Required if rider is a minor):	Energy must be postulatived by peptember 2, 2014							