

**BLOWING ROCK CHARITY SADDLEBRED HORSE SHOW**

**June 6-9, 2024**

**Entries must be postmarked by May 24, 2024**

One Horse per Entry Blank

Make Checks Payable to:

**Blowing Rock Charity Saddlebred Horse Show**

Mail To: Liz Holmes

PO Box 362

Mebane, NC 27302

lizholmes1957@gmail.com

PLEASE PRINT OR TYPE (Fill out completely)

**Owner** \_\_\_\_\_ USEF # \_\_\_\_\_ Association # \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**Trainer** \_\_\_\_\_ USEF # \_\_\_\_\_ Association # \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**Rider/Driver/Handler** \_\_\_\_\_ USEF # \_\_\_\_\_ Association # \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Make Checks payable to: \_\_\_\_\_ Social Security /Tax ID \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

|            |            |     |  |                |            |
|------------|------------|-----|--|----------------|------------|
| Office use | Horse Name |     |  | Registration # | USEF #     |
| Color      | Sex        | Age |  | Height         |            |
| Class #    |            |     |  |                | Total Fees |
| Entry Fee  |            |     |  |                |            |

|   |                                                                              |          |
|---|------------------------------------------------------------------------------|----------|
|   | <b>TOTAL ENTRY FEES</b>                                                      | \$       |
| # | _____ STALLS @ \$125 Each Arrival Date: _____<br>Stall fees must be pre-paid | \$       |
| # | Stalls for early arrival @\$20 each per day                                  | \$       |
| # | Grounds Fee (non-stabled horses) @\$25                                       | \$       |
| # | USEF DRUG FEE @ \$23 PER HORSE (\$15 Drug & Med/\$8 USEF)                    | \$ 23.00 |
| # | OFFICE FEE PER ENTRY – non-refundable                                        | \$ 25.00 |
| # | Post entry per horse @ \$25 – non-refundable                                 | \$       |
| # | Shavings per bag @ \$9.00                                                    |          |
| # | Pre-Bedding of Stalls @ \$17/Stall                                           |          |
| # | Camper Fee Per Day @\$40 Arrival _____, Departure _____                      |          |
|   | <b>TOTAL REMITTANCE</b>                                                      | \$       |

**USEF ENTRY AGREEMENT ON THE BACK MUST BE SIGNED.**

## FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultler 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 the Blowing Rock Saddlebred Horse Show (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.

If not currently a USEF Active Competing member or Subscriber, I acknowledge that I will be enrolled for no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew in USEF's sole discretion. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. USEF may in its sole discretion, at any time, terminate my USEF Fan status.

BY SIGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at [www.usef.org](http://www.usef.org), as amended from time to time, as well as 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/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### TRAINER (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### OWNER/AGENT (mandatory)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### COACH (if applicable)

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaultler/Longeur is a minor)

\_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_

Emergency Contact Phone No. \_\_\_\_\_

Is Rider/Driver/Vaultler a U.S. Citizen:  Yes  No