

THE LEXINGTON COUNTRY HORSE SHOWS

Make checks payable to: Colebelle Horse Shows and mail to 818 Old Providence Rd, Spottswood, VA 24476

January 20-23, 2022

SEPARATE ENTRY MUST BE SUBMITTED FOR EACH SHOW - CHECK BOX

Feb. 4-6, 2022

HORSE					USEF REC. #	RIDER #1				ASPCA #	VHSA #	RIDER DATE OF BIRTH	DIVISION ENTRIES (Put #1 for Regular Rider and #2 for Alternate Rider)									
COLOR	SEX	HT.	AGE	BREED		RIDER #2				ASPCA #	VHSA #	RIDER DATE OF BIRTH	S/M GRN PONY	LG GRN PONY	SM PONY	MED PONY	LG PONY	SM JR 3'6"	LG JR 3'6"	JR YNG 3'3"	JR OLD 3'3"	
					SM MD LG																	

A/O OLD 3'3"	A/O YNG 3'3"	A/O OLD 3'6"	A/O YNG 3'6"	CONF HTR	GRN 3'	GRN 3'3"	GRN 3'6"	GRN 3'9"	HP HTR	3'3" PWH	3'6" PWH	YNG CH	OLD CH	YNG A/A	OLD A/A	OPEN HTR	SCH HTR	S/M CH PONY	LG CH PONY	COLIS HTR	

HOPE HTR	SS HTR	PRE CH/AD 2'	LOW PRE CHILD 2'6"	LOW PRE ADULT 2'6"	BABY GR HTR	3' TB HTR	3' SM HTR	SPEC CH	SPEC AD	VICT HTR

ONLINE ENTRIES AVAILABLE AT HORSESHOWSONLINE.COM
Still need to reserve stabling on form on page 6

EQUITATION AND NON-DIVISION CLASS NUMBERS	
RIDER 1	
RIDER 2	

United States Equestrian Federation, Inc. Entry Agreement
 I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for this Lexington Country Horse Show ("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 at 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.

Measurement Friday at 4PM by appt.

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, 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 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.

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____
 Print Parent/Guardian Name: _____ Emergency Contact Phone Number: _____
 Is Rider/Driver/Vaulter a U.S. Citizen: _____ Yes _____ No

Stable with (list TRAINER'S OR FRIEND'S LAST NAME. NOT FARM NAME): _____

EMERGENCY CONTACT NUMBER: _____

CAMPER SPOTS RESERVED AT 540-464-2966

Coach (if applicable)

Signature: _____
 Print Name: _____
 USEF # _____

Call Hay/Bedding/Golf Cart Orders in to 540-464-2966
Need credit card to hold.

Reserve _____ stalls @ \$185 per horse.	
Day of arrival T W TH F S S	
Day of Arrival/Departure MUST be indicated	
or Grounds Fee: \$45	
USEF Show Pass: \$45	
USEF Fed Fee @ \$23 per horse (\$8 D&M, \$15 USEF)	\$23
USHJA Fee	\$7
USHJA Non-Member Fee: \$30	
Office Fee: \$40	\$40
Late Fee: \$35	
For entries made after 1/14 or 1/28	
Paid \$ _____ Check # _____	
COGGINS MUST BE SHOWN IN HORSE SHOW OFFICE	

Owner or Agent (mandatory)	Rider #1 (mandatory)	Rider #2 (mandatory)	Trainer (mandatory)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Owner Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Address: _____	Address: _____	Address: _____	Address: _____
USEF # _____ Cell _____	USEF # _____ Cell _____	USEF # _____ Cell _____	USEF # _____ Cell _____
E-mail _____	E-mail _____	E-mail _____	E-mail _____
SS# _____	Alternate Payee: _____	SS# _____	Name _____ Address _____