

THE SPRING WELCOME

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

March 3-6, 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	HEIGHT	AGE	BREED		RIDER #2					ASPCA #	VHSA #	RIDER DATE OF BIRTH	CONF HTR	3'6" GRN	3'9" GRN	3' GRN	3'3" GRN	HP HTR	PWH 3'3"	PWH 3'6"	3'3" JR (O) HTR	3'3" JR (Y) HTR

3'6" SM JR	3'6" LG JR	S/M GRN PONY	LG GRN PONY	SM PONY	MED PONY	LG PONY	3'6" YNG A/O	3'6" OLD A/O	3'3" YNG A/O	3'3" OLD A/O	YNG A/A	OLD A/A	YNG CH	OLD CH	TAKE2 TB HTR	Sm CH PONY	Med CH PONY	LG CH PONY	LOW HTR	HOPE HTR	
OPEN HTR	BGr HTR	REEL HTR	2'9" STU HTR	3' STU HTR	PRE CH/AD 2'	PRE CHILD 2'6"	PRE ADULT 2'6"	SP CH HTR	SP AD HTR	ZONE 3 HTR	SM HTR	SCH HTR	ADDITIONAL INDIVIDUAL CLASS NUMBERS								

Reserve _____ stalls @ \$175 per horse.	
Day of arrival T W TH F S S	
Day of departure TH F S S	
Day of Arrival/Departure MUST be indicated	
or Ground Fee: \$25/day	
USEF Fee @ \$23 per horse (\$8 D&M, \$15 USEF)	\$23
USHJA Fee	\$7
USEF Show Pass Fee @ \$45	
USHJA Show Pass Fee @ \$30	
Office Fee: \$45	\$45
Late Fee: \$35 For entries POSTMARKED after 2/25	
Paid \$ _____ Check # _____	
COGGINS MUST BE SHOWN IN HORSE SHOW OFFICE	

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 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.

**ONLINE ENTRIES AVAILABLE AT
HORSESHOWSONLINE.COM**

I AGREE in consideration for my participation in this Competition to the following:

I AGREE that the "Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation 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 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: _____

**Friday 4pm
Measurement
by appointment**

**Call Bedding & Golf Cart
Orders in to 540-464-2966
Must have open check
or credit card.**

Coach (if applicable) _____

Signature: _____

Print Name: _____

USEF # _____

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: _____
NAME SSN FULL ADDRESS