

ONE OWNER PER FORM USEF # _____ AMHA # _____
 UPHA # _____ USDF # _____
 OWNER _____
 ADDRESS _____

 PHONE _____
 EMAIL _____
 PLEASE STABLE WITH _____

**JUBILEE REGIONAL
 MORGAN HORSE SHOW**

AUG. 31 - SEPT. 3, 2011

ENTRIES CLOSE AUGUST 1, 2011

JUBILEE FUTURITY NOMINATIONS
 DUE JULY 14, 2011

Please make checks payable to
 Jubilee Morgan Horse Show
 and return this form to:

Linda Burke, Secretary
435 Middle Rd.
Horseheads NY 14845

607-739-6169

Email : LBURKE1177@yahoo.com

EB#

Entry #	Horse Name #1				USDF	Sex	DOB	Sire	Dam
					Reg. #				
	Classes					Shown By			
Classes					Shown By				
Entry #	Horse Name #2				USDF	Sex	DOB	Sire	Dam
					Reg. #				
	Classes					Shown By			
Classes					Shown By				
Entry #	Horse Name #3				USDF	Sex	DOB	Sire	Dam
					Reg. #				
	Classes					Shown By			
Classes					Shown By				

TOTALS

HORSE #1 _____

HORSE #2 _____

HORSE #3 _____

HORSE STALLS
 @ \$120 _____

USEF DRUG FEE
 \$15 PER HORSE _____
 (INCLUDES D&M \$7)

USEF
 NON-MEMBER
 FEE
 @ \$30 _____

AMHA
 NON-MEMBER
 FEE
 @ \$30 _____

AMHA
 JUDGES
 EDUCATION FEE
 PER HORSE
 @ \$2.00 _____

OFFICE FEE
 PER HORSE
 @ \$10 _____

BOX SEATS
 @ \$75/SET
 OF SIX (6) _____

POST ENTRY
 FEES \$20 PER
 HORSE AFTER
 AUGUST 1. _____

★ GOLF CARTS

 (PRE-ORDER ONLY)

TOTAL _____

OFFICE USE ONLY

USEF# _____ AMHA# _____

REG _____ COG _____

RABIES _____ UPHA# _____

SIG _____ PD _____

CK# _____ CC _____

USDF# _____

Make checks payable to:

Jubilee Regional Morgan Horse Show

Non-US checks must be marked
 "Payable in US Funds"

★ **GOLF CARTS**

Mon. - Sat. (6 days)
 2 SEATERS — \$350
 4 SEATERS — \$425

Rider #1 _____

Address _____

City, State, ZIP _____

USEF# _____ AMHA# _____ UPHA# _____ USDF# _____

Rider #2 _____

Address _____

City, State, ZIP _____

USEF# _____ AMHA# _____ UPHA# _____ USDF# _____

Please use this form to list all your customers who are to be stabled with you, including those sent in separately. Requests from entries to be stables with you will not be considered unless their name appears on the list below.

Owners Name	# Stalls
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

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 Jubilee Regional Morgan Horse Show and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, 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 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 Jubilee Regional Morgan 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 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 resulted, 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 that I 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 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.

X _____ (Owner/Agent) Mandatory—See front for complete address/USEF Number info	X _____ Trainer (Mandatory) USEF # _____	X _____ (Rider/Driver/Handler #1 (Mandatory)) Print Name _____
Print Name _____	Print Name _____	X _____ (Rider/Driver/ Handler #2 (Mandatory)) Print Name _____
Coach Signature _____	Address _____	X _____ (Rider/Driver/Handler #3 (Mandatory)) Print Name _____
Print Coach Name _____	City, State,Zip _____	
Coach USEF# _____	Phone _____	
Coach Address _____	E-Mail: _____	

Parent/Guardian Signature: (If Rider/Driver/Handler is a minor) _____	Emergency Number _____
Print Parent/Guardian Name: _____	Is Rider/Driver a US Citizen: ____ Yes ____ No