

COMPLETED ENTRY FORM  
MUST BE RETURNED BY  
JULY 24, 2019

## 2019 USHJA INTERNATIONAL HUNTER DERBY CHAMPIONSHIP AUGUST 15 - 17, 2019

MAIL TO:  
Bluegrass Festival  
3005 Montavesta Road  
Lexington, KY 40502

Make checks payable to BLUEGRASS FESTIVAL or fill out CREDIT CARD FORM

Online entries accepted at <http://entries.showmanagementsystem.com>

HORSE NAME					USEF HORSE RECORDING #	RIDER NAME	OWNER NAME
COLOR	SEX	HT.	AGE	BREED	SIRE	DAM	

**Federation Entry Agreement**

I have read the United States Equestrian Federation, Inc. (The "Federation") Entry Agreement (GR906.4) as printed in the Prize List for the USHJA International Hunter Derby Championship ("Competition") 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 NY 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 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 further 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.

Owner USEF #: _____  Owner: _____  Street Address: _____  City/State/Zip: _____  Email Address: _____  SS#/TIN#: _____ Corporation? Yes _____ No _____	Trainer USEF #: _____  Trainer: _____  Street Address: _____  City/State/Zip: _____  Email Address: _____  Phone # / Fax #: _____
Name Associated with SS/TIN: _____  Phone # / Fax #: _____  Owner Agent Signature: _____  Rider: _____	Trainer Signature: _____  Coach: _____ Coach USEF#: _____  Coach Signature: _____

**PLEASE NOTE: All USHJA International Hunter Derby Championship entries must fill out a Bluegrass Festival Horse Show entry form. All stabling and other horse show fees as published in the Kentucky Summer Series prize list must be paid to Bluegrass Festival Horse Show.**

Derby Championship Entry Fee** 80% of entry fee added back to prize money	\$1,000
Premium Entry Fee Option** In addition to Derby Championship Entry Fee	\$3,000
LATE FEE AFTER ENTRY DEADLINE, July 24, 2019	\$250
<b>TOTAL DUE:</b>	

**\*\*Entry fee, including premium entry fee if applicable, is non-refundable after August 2, 2019**

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

STABLE WITH: \_\_\_\_\_ ARRIVAL DATE: \_\_\_\_\_

USEF Competition Name: Blue Grass Festival Horse Show  
Competition Division(s) and Rating(s):

USEF#: 4671

Hunter Ratings: Premier

USEF Jumpr Rating: Level 4

FEL:

# ATTENTION COMPETITORS



## USEF SAFE SPORT TRAINING REQUIREMENT

Starting January 1, 2019, if you are a USEF Competing Member 18 years of age or older you are required to complete the core Safe Sport Training within 30 days of activating your membership.

If you do not complete the training, you are ineligible to participate in all USEF activities including competitions.

TAKE the SAFE SPORT TRAINING at USEF.org by logging into your member dashboard.

#youarenotalone



## KENTUCKY HORSE SHOWS, LLC CREDIT CARD AUTHORIZATION FORM

To use this service, please fill out the form below and return with all fields completed.  
**NOTE: A 3% service fee will be assessed on all credit card charges.**

Horses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner: \_\_\_\_\_

Trainer: \_\_\_\_\_

### Credit Card Information

Cardholder's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Please circle one: Visa          MasterCard          Amex

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature:\* \_\_\_\_\_ Date: \_\_\_\_\_

\*I authorize the Kentucky Horse Shows, LLC to debit my account for applicable fees.

\*I agree to the 3% service fee included in these transactions.