

# 2010 USDF Region 1 Youth Team Competition Rider/Horse Form

Official Use Only	Bridle No.
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Competitors are responsible for duplicating their own additional copies of this entry form. This is a 2-sided form. Other versions of entry forms may not be accepted by Region 1 competitions. **TYPE OR PRINT CLEARLY -- ONLY ONE HORSE / RIDER or HANDLER PER ENTRY FORM**

Competition Name: **2010 USDF Region 1 Youth Team Competition**

Competition Date(s): July 24 & 25, 2010

NAME OF HORSE (Horse MUST be named)	BREED	COUNTRY (Where Bred)	SEX	HEIGHT	COLOR	AGE	DOB
Date of Coggins (must attach copy):		Breed Registration Number:		Check here if this horse is for sale and you want this to be listed in the Program _____			
Sire:		Dam:		Dam's Sire:			
For Dressage Sport Horse Breeding (DSHB) classes, Sire, Dam, Dam's Sire & Breeder names required for ALL breed registered horses & recommended for others.			Breeder:				

Rider/Handler: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Eve Phone: \_\_\_\_\_

Rider's Address: \_\_\_\_\_

Rider/Handler E-Mail: \_\_\_\_\_ FAX: \_\_\_\_\_ Citizenship\*: \_\_\_\_\_

Owner: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Eve Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_


Class #	Day	Class Name (Level/Division/Test - if TOC)	Fee	Payment For	Fee	Office Use
	Sat	Team level:	n/a	Subtotal, Class Fees		
	Sat					
	Sun	Team level:	n/a			
	Sun					
				Stabling		
				Grounds Fee (For Non-Stabled Horses)		
SUBTOTAL Class Fees						

**TOTAL FEES DUE per rider (not including the Team Fee:** \_\_\_\_\_


I, the undersigned, understand that there are risks of injury and death inherent in all equine activities, including the event named below. Such risks include, but are not limited to: (i) the propensity of an equine to behave in dangerous ways which may result in injury to or death of participants in such activities; (ii) the inability to predict an equine's reaction to sound, movements, objects, persons or animals; and (iii) the hazards of surface or subsurface conditions. I assume all risks of injury, death, and/or injury or damage to property, including equines, associated with participation in equine activities. I waive all rights to sue VADA, VADA/Nova, Inc., Morven Park or the United States Dressage Federation (USDF) and/or any of their officers, directors, volunteers, employees and agents, the judges at this event, the owner or lessor of the facilities where the event is held, and/or any sponsor of this event for injury to or death of me or, where applicable, the junior rider named below, and/or for injury or damage to property, including equines. I agree to indemnify and hold harmless the foregoing parties from and against any and all such claims of injury, death, or damage. This Liability/Release form is to be construed in accordance with, and to be as broad as permitted by, the Equine Activity Liability Act set forth in the Virginia Code.

<b>*PARENT (mandatory)</b>	<b>*OWNER / AGENT (mandatory)</b>		
Signature: _____	Signature: _____		
Print: _____	Print: _____		
<b>*Rider – if 18 years or older</b>		<b>Home Emergency Phone Contact #</b>	

*\* No entry is valid without original signatures from the above individuals; Photocopied signatures or writing "same" are NOT acceptable.*

STABLING / CAMPER HOOK-UP RESERVATION FORM (Refer to Prize List for Specifications)								
Rider Name: _____				Home Phone: _____				
Name of Lodgings Where Rider or Responsible Party Will be Staying During the Competition _____				Telephone Number at the Competition (For Emergency Contact Purposes) _____				
Stall Occupant	Sex (S,M,G)	Check Stall Days/Nights Desired (see prize list directives)						
		Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Horse Name								
Team Name:								
Approx. Time of Arrival: _____ Approx. Time of Departure: _____								
Special Requests*: _____								
*Provide name of individual with whom you desire to be stabled (if part of a group, make sure you all name the same person)								
Stabling fees: _____ stalls for @ \$ _____ per weekend = _____								
Camper fees _____ hook-ups @ \$ _____ ea (flat rate) OR _____ nights @ \$ _____ per night = _____								
TOTAL STABLING / CAMPER HOOK-UP FEES: _____								

ENTRY PREPARATION CHECKLIST
<i>Before Mailing, Be Sure You Have:</i>
____ Completed Both Sides of the Entry Form
____ All Original Required Signatures
____ Enclosed a Copy of the Current Negative Coggins (EIA) Certificate (Refer to the Competition)
____ 2010 YT Team Form (1 per team)
Reservation Form
____ Enclosed a Check / Money Order for all Applicable Fees.
<b>Mail this Entry Form, Supplemental Documents, and Fees to the Competition (Entry) Secretary Identified on the Prize List.</b>

**PLEASE SUBMIT ANY IMPORTANT INFORMATION FOR THE ANNOUNCER ON A SEPARATE SHEET**