

2022 VHJA / Twitchell Hill Farm EntryForm ~ October 1st

| Horse | | | | | Rider 1 | | | Rider 2 | | | | | |
|----------------|-----|---|--------|----------------|----------------|--|--|---|--------|--------|---|--------|--------|
| Name | | | | Breed | Name | | | Name | | | | | |
| Age | Sex | <input type="checkbox"/> Coggins <input type="checkbox"/> Rabies | Height | Color | Address | | | Address | | | | | |
| VHJA # | | NEHC # | | Pony Size: | City/State/Zip | | | City/State/Zip | | | | | |
| Owner | | | | Trainer | | | | Email | | | Email | | |
| Name | | | | Name | | | | Membership | VHJA # | NEHC # | Membership | VHJA # | NEHC # |
| Address | | | | Address | | | | Adult: <input type="checkbox"/> Junior: <input type="checkbox"/> Date of Birth: _____ | | | Adult: <input type="checkbox"/> Junior: <input type="checkbox"/> Date of Birth: _____ | | |
| City/State/Zip | | | | City/State/Zip | | | | EMERGENCY CONTACT & Phone # | | | EMERGENCY CONTACT & Phone # | | |
| Email | | | | Email | | | | RIDER BACK # | | | RIDER BACK # | | |
| Phone # | | | | Phone # | | | | Classes: | | | Classes: | | |

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 NEHC, VHJA and Federation affiliates. **I AGREE** that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longer, 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. **Under Vermont Law, an equine activity sponsor is not liable for an injury to, or the death of a participant pursuant to 12.V.S.A Section 1039**

BY SIGNING BELOW, I AGREE to be bound by all applicable NEHC, VHJA & Federation Rules and all terms and provisions of this entry blank

| Owner/Agent- MANDATORY | Rider 1 - MANDATORY | Rider 2 - MANDATORY |
|------------------------|---|---|
| Signature: _____ | Signature: _____ | Signature: _____ |
| Print Name: _____ | Print Name: _____ | Print Name: _____ |
| Trainer- MANDATORY | Parent/Guardian (if Rider 1 is a minor) | Parent/Guardian (if Rider 2 is a minor) |
| Signature: _____ | Signature: _____ | Signature: _____ |
| Print Name: _____ | Print Name: _____ | Print Name: _____ |

Fees Rider 1

Total Class Fees: _____
 Office Fee (Leadline exempt): _____
 Post or Incomplete Entry fee: _____
TOTAL FEES: _____

Payments

Type: Check Check # _____
 Comments: _____

Fees Rider 2

Total Class Fees: _____
 Office Fee (Leadline exempt): _____
 Post or Incomplete Entry fee: _____
TOTAL FEES: _____

Payments

Type: Check Check # _____
 Comments: _____