

EVENSTRIDE LTD.							Date: _____		POST ENTRY	# ASSIGNED	
Note: Only ONE horse accepted per entry form, which may be photocopied.											
Name of Horse		Age	Meas/Am#	Horse ID or Recording #		Sex	Height	Color	Horse/Pony		Am. Ad. Age
									<input type="checkbox"/> Small <input type="checkbox"/> Med <input type="checkbox"/> Large	<input type="checkbox"/> 18 - 35 <input type="checkbox"/> Over 35	
Rider #1 Name		Age	USEF #	ASPCA #	NEHC #	MHC #	CLASSES ENTERED				Total Fees
							Class #				
							Class #				
Rider #2 Name		Age	USEF #	ASPCA #	NEHC #	MHC #	CLASSES ENTERED				Total Fees
							Class #				
							Class #				
Release, Assumption of Risk, Waiver and Indemnification <u>This document waives important legal rights. Read it carefully before signing.</u> I AGREE in consideration for my participation in this Competition Evenstride Ltd. to the following: I AGREE that the "Competition" as used herein includes the License and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and 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 a 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 Competition and the New England Horsemen's Council 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 Competition. I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Competition. I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) 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 of 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 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.										TOTAL ENTRY FEES	
										NEHC Fee	\$2.00
										Office Fee	\$15.00
										Warm - Up(s)	\$25.00
										# Deposit	\$1.00
										SUB TOTAL	
										Prize Money	< >
										GRAND TOTAL	
Office Use Only Below											
Amt. Rec: _____											
Ck #/Cash _____											
Mail Entries to: Christina Phaneuf 42 Eighth Street #2511 Charlestown, MA 02129											
Email Entries to: cmphaneuf2@gmail.com											
X _____	X _____	X _____									
Riders Signature	Trainers Signature	Owner/Agent Signature									
Name _____	Name _____	Name _____									
Address _____	Address _____	Address _____									
City _____	City _____	City _____									
State/Zip _____	State/Zip _____	State/Zip _____									
Phone _____	Phone _____	Phone _____									
Riders USEF # _____	Trainers USEF # _____	Owner/Agent USEF # _____									
X _____	Print Name : _____		Emergency Phone _____								
Parent/Guardian Signature (Required if rider/driver/handler is a minor)											
Riders Email _____					Coach Signature _____						
Trainers Email _____					Print Name _____						