ENTRIES CLOSE: AUGUST 24, 2021				STRIDES & TIDES					SEPTEMBER 15 - 19, 2021							
Owner Name	OWNER OR AUTHO	DRIZED AGENT		Rider Na	me	RI	DER 1		Trainer Name		TRAINE	R				
Address				Address					Address							
City		State	ZIP	City			State	ZIP	City			State	ZIP			
Social Security # or TIN #				Phone			E-Mail		Phone			E-Mail				
Phone		E-Mail		USEF# USHJA#		PCHA#		Date of Birth	Barn Phone			Cell Phon	e			
JSEF# JSHJA#	PCHA#			CPHA#		ASPCA#			USEF# USHJA#	PCI	HA #					
Pri	ze money paid to if	other than own	er			RI	DER 2			CRE	DIT CARD I	PAYMENT				
Name or Corporation				Rider Na	me				Download credi	t card f	orm at h	eadland	Isman	agemen	t.com	
Address				Address							RIDER	2				
City		State	ZIP	City			State	ZIP	USEF# USHJA#		PCHA#			Date of Birth	ı	
Social Security # or TIN #				Phone			E-Mail		CPHA#		ASPCA#					
	NAME OF H	HORSE		AGE	COLOR	SEX	HEIGHT	F	IDER			CLAS	SES			
/licrochip #					Please circle be	low if applic	cable									
USEF# JSHJA#		Measurement #				Sm I	Md Lg									
				F	ederation En	try Aa	reement						<u> </u>	ASSOCIATION	ON FEES	
Longeur and on b Equestrian Federa	ehalf of myse ation, Inc. (the	If and my p "Federatior	rincipals, represent ") and the local ru	nis entry ntatives ules of l	y blank as the , employees and HMI August Cla	Owner, nd agen assic ag	Lessee, Train ts, I agree tha ree to be bour	at I am subject to nd by the Bylaws	ent, Coach, Driver, Forther Bylaws and Ruand Rules of the Forther and agree to relea	iles of ederation	The Uni on and o	ted Sta f the co	tes m-	Fo USEF I USHJA I CDFA I	SEF Drug ee @ \$15 Fee @ \$8 Fee @ \$7 Fee @ \$8 Fee @ \$3	
									, and agree to relea I am eligible to ente					SHOW PAS	SS FEES EF PASS	

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulter or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of HMI August Classic agree to be bound by the Bylaws and Rules of the Federation and of the competition (Competition). I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

BY SIGNING BELOW, I 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/AGENT	RIDER/HANDLER	TRAINER	N
SIGNATURE:	SIGNATURE:	SIGNATURE:	į
Print Name:	Is Rider/Handler is U.S. Citizen (please circle): YES NO Print Name:	Print Name:	4
(Required if Rider/Handler is a minor) PARENT/GUARDIAN SIG.:	SIGNATURE:	COACH SIGNATURE:	_ (
Print Name:	Is Rider/Handler is U.S. Citizen (please circle): YES NO Print Name:	Print Name Emerg. Contact Phone#:	
CHECKS PAYABLE TO: HMI MAIL TO: 1 I	VY ST * MONTEREY, CA 93940 INFO: 831-594-1719 STABLE	With:	

USEF PASS Fee @ \$45 USHJA PASS Fee @ \$30

MISC FEES

Ambulance Fee @ \$30 Late Fee @ \$50 Trailer In Fee @ \$50 (per horse per day) Non Showing Fee @ \$130

NOMINATING FEES

Horse @ \$125

10 x 10 Stalls Horse Stall @ \$350 Tack/Groom @ \$350

10 x 12 Stalls Horse Stall @ \$400 Tack/Groom @ \$400

Limited - First come, First served.

of stalls @ \$350 # of stalls @ \$400