

ENTRIES CLOSE: JUNE 23, 2020

HMI AUGUST CLASSIC

AUGUST 4 - 9, 2020

OWNER OR AUTHORIZED AGENT			RIDER 1			TRAINER		
Owner Name			Rider Name			Trainer Name		
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#	PCHA #	Date of Birth	Barn Phone		Cell Phone
USEF#	PCHA #		USHJA#			USEF#	PCHA #	
USHJA#			CPHA #	ASPCA #		USHJA#		
Prize money paid to if other than owner			RIDER 2			CREDIT CARD PAYMENT		
Name or Corporation			Rider Name			Download credit card form at headlandsmanagement.com		
Address			Address					
						RIDER 2		
City	State	ZIP	City	State	ZIP	USEF#	PCHA #	Date of Birth
Social Security # or TIN #			Phone			E-Mail		
						CPHA #	ASPCA #	
NAME OF HORSE			AGE	COLOR	SEX	HEIGHT	RIDER	
							CLASSES	
Microchip #			Please circle below if applicable					
USEF#	Measurement #		Sm	Md	Lg			
USHJA#								

Federation Entry Agreement

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor 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 the HMI August Classic (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the 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, the Federation, 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 Competition may use or assign photographs, videos, audios, cablecasts, 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.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND COMDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in any USEF Event. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

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.

M A N D A T O R Y	OWNER/AGENT	RIDER/HANDLER	TRAINER	M A N D A T O R Y
	SIGNATURE:	SIGNATURE:	SIGNATURE:	
	Print Name:	Is Rider/Handler is U.S. Citizen (please circle): YES NO Print Name:	Print Name:	
	(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 IVY ST * MONTEREY, CA 93940 INFO: 831-594-1719

STABLE WITH: _____

ASSOCIATION FEES

USEF Drug Fee @ \$15
USEF Fee @ \$8
USHJA Fee @ \$7
CDFA Fee @ \$8
PCHA Fee @ \$3

SHOW PASS FEES

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