

Office Use Only

Only ONE HORSE per entry form.
PLEASE type or print clearly.

Buffalo International Horse Show

September 12-16, 2018

Entries Close:
Aug 30, 2018

Name of Horse or Pony	Gr Year	USHJA Horse Reg #	Color	Sex	Height	Foaled	Sire	Dam

SECTION ENTRY (all classes in a section) - please indicate Rider 1 or Rider 2

- | | | | | |
|--------------------------------------|---|---|--------------------------------------|--|
| <input type="checkbox"/> High Perf | <input type="checkbox"/> Non-Pro | <input type="checkbox"/> AO 3'6" 18-35 | <input type="checkbox"/> Sm Pony | <input type="checkbox"/> Children's 14&U |
| <input type="checkbox"/> 3'6" Green | <input type="checkbox"/> Low Hunter | <input type="checkbox"/> AO 3'6" 36 & O | <input type="checkbox"/> Med Pony | <input type="checkbox"/> Children's 15-17 |
| <input type="checkbox"/> 3'9" Green | <input type="checkbox"/> Perf 3'3" | <input type="checkbox"/> AA 18-35 | <input type="checkbox"/> Large Pony | <input type="checkbox"/> S/M Child Pony |
| <input type="checkbox"/> HP Conf. | <input type="checkbox"/> Perf 3'6" | <input type="checkbox"/> AA 36 & O | <input type="checkbox"/> Sm Jr Young | <input type="checkbox"/> Lg Child Pony |
| <input type="checkbox"/> Green Conf. | <input type="checkbox"/> AO 3'3" 18-35 | <input type="checkbox"/> Pre Adult | <input type="checkbox"/> Lg Jr Young | <input type="checkbox"/> Small Jr. Hunter 3'3" |
| <input type="checkbox"/> 3' Green | <input type="checkbox"/> AO 3'3" 36/O | <input type="checkbox"/> Pre Children's | <input type="checkbox"/> Sm Jr Old | <input type="checkbox"/> Large Jr. Hunter 3'3" |
| <input type="checkbox"/> 3'3" Green | <input type="checkbox"/> TB Hunter 2'6" | <input type="checkbox"/> TB Hunter 3' | <input type="checkbox"/> Lg Jr Old | <input type="checkbox"/> Baby Green |

Equitation and Individual Classes by Rider

Rider 1	Rider 2

Jumper Classes by Rider

Rider 1	Rider 2

Federation Entry Agreement
I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for Buffalo International ("Competition") and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos from the competition, and agree that any actions against the Federation must be brought in New York State.

Federation Release, Assumption of Risk, Waiver and Indemnity This document waives important legal rights. Read it carefully before signing.

I AGREE in consideration for my participation in this Competition to the following:

I AGREE that the "Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

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 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.

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.

A Negative Coggins Test dated within one year of the show must accompany this entry.

Failure to present proper USEF/USHJA membership cards will result in non-member fees being charged.

Entry Fees =
EMT/Office Fee (\$15) =
Stalls @ \$150 (\$175 after 9/1) =
Hay (price posted at show) =
Shavings (price posted at show) =
USHJA Fee (\$7) =
USEF Fee/USEF D&M Fee (\$23) =
USEF Show Pass NM Fee: (\$45) <input type="checkbox"/> Owner <input type="checkbox"/> Rider <input type="checkbox"/> Trainer
USHJA Show Pass NM Fee: \$30 <input type="checkbox"/> Owner <input type="checkbox"/> Rider <input type="checkbox"/> Trainer
Total Due =
Amount Enclosed - MUST ENCLOSE ALL STALL FEES Stalls will not be reserved without payment!
Stable With
Arrival Date/Time

Owner Signature:	Trainer Signature:	Rider #1 Signature:	
Name	Name	Name	
USEF #	USEF #	USEF #	
Address	Address	ASPCA #	Birthdate
City, State, Zip	City, State, Zip	Address	
Phone	Phone	City, State, Zip	
Fax	Fax	Rider #2 Signature:	
Cell	Cell	Name	
Email	Email	USEF #	
SS #	SS #	ASPCA #	Birthdate

Alternate Payee		Coach	
Name	Sig.	Address	
SS #	Name	City, State, Zip	
Address	Emergency Contact		
City, State, Zip	Phone	Sig.	
		Name	

Make checks payable (in US Funds) and mail to:
BTRC
950 Amherst Street
Buffalo, NY 14216
716-877-9295; 716-877-4001 fax