# EASTERN STATES EXPOSITION HORSE SHOW II 1305 MEMORIAL AVENUE, WEST SPRINGFIELD, MA 01089 Phone: (352) 812-7487

HShow1@TheBigE.com

Fax: (413) 205-5104 E-mail: Fax After 9/15: (413) 205-5108

SEPTEMBER 19-22, 2024 ENTRIES CLOSE SEPT. 4 enter at horseshowsonline.com Saddlebreds, Hackneys, Morgans, Friesians & Opportunity Classes

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NAME OF HORSE OR PONY	USEF #	BREED	AHHS#	ASHA #	ARPHA#	AMHA#	STABLE WITH
HEALTH □ COGGINS □ VACCINE □							

UNITED STATES EQUESTRIAN FEDERATION, INC. ENTRY AGREEMENT 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 Eastern States Exposition and NEHC (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 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. I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, 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. ERSE\*

OWNE	R INFORMATION	RII	DER ONE INFORMATION		RIDER ONE CLASS NUMBERS	5	CLASS I
Owner Name		Rider 1 Name					\$
Address		Address			RIDER TWO CLASS NUMBER:	S	CLASS I
City	State Zip	City	State Zip		MIDEN THE CENTER NEW PERSON		\$
Phone		Phone					3
E-mail		E-mail		QTY	WEEKLY ITEMS	FEE	TOTA
					C Barn Box Stall ALL HORSES MUST HAVE STALL	\$ 125	
USEF#	NEHC#	USEF#	NEHC#		Camper Parking - LIMIT 1 PER ENTRY	\$ 200	
* OWNER/AGENT SIGNATUR	RE *	* RIDER ONE SIGNAT			Reserved Parking - LIMIT 1 PER ENTRY	\$ 100	
		(Parent/Guardian, if mi	nor)		Box Seat - 4@\$100 / 6@\$150 / 8@\$200	\$	
TRAINE	ER INFORMATION	Date of Birth	Is Rider US Citizen? ☐ YES or ☐ NO		Class Sponsorship	\$ 100	
Trainer Name		RID	ER TWO INFORMATION		Champion Sponsorship	\$ 175	
- N		Rider 2 Name	ER I WO INFORMATION		Additional Wristbands	\$ 20	
Farm Name		Rider 2 Name			Late Fee After 9/4	\$ 25	
Address		Address			Service Fee	\$ 25	
City	State Zip	City	State Zip		\$15 USEF+\$8 Drug/Medication	\$ 23	
Phone		Phone			AMHA Nonmember Fee	\$ 45	
FIIOTIE		Thone		CK#	TOTAL AMOUNT ENCLOSED	\$	
E-mail		E-mail				<u> </u>	
USEF#	NEHC#	USEF#	NEHC#				
* TRAINER SIGNATURE *		* RIDER TWO SIGNA* (Parent/Guardian, if mir		С	HECKS TO EASTERN STATES	S EXPO	SITION
Emergency	Phone	Date of Birth	Is Rider US Citizen? □ VES or □ NO	DAN	MENT IN FULL MUST ACCOM	DANY T	HIC EOD

FEED & BEDDING, CREDIT CARD, ADMISSIONS INFORMATION ON BACK SIDE OF ENTRY BLANK

Number

Contact

OFFICE USE

	sition Horse Show offers the co ving credit cards. Fill out this port			
□ VISA	□ MasterCard	☐ Discover		
Card #				
Expiration Date	Security Code			
Card Holder				
Billing Address				
City	State Zi	р		
Phone				
*IAUTHORIZE EASTERN STATES EXPOSITION HORSE SHOW AND FEED STORE TO DEBIT MY ACCOUNT *				
* SIGNATURE *				
ORDER	FEED AND B	EDDING		
	413) 205-530			
(	, <b>-</b> 00 000	-		

ORDER IN ADVANCE FOR TIMELY DELIVERY

SEND EXHIBITOR W	RISTBAND &	PARKING PASSES TO:			
Reserved Parking and Wristbands will not be mailed unless payment in full has been received no later than September 4th					
NAME					
Address					
City	State	Zip			
CELL PHONE					
E-mail					
	OFFICE USE				

#### 2024 GATE ADMISSION POLICY

Two (2) Wristbands and Two (2) Gate 1 Regular Parking Passes will be provided at no charge for each horse actively entered in classes. Additional exhibitor wristbands may be purchased on your entry blank or in the horse show office for \$20 each. Reserved Gate 1C Parking Passes can be purchased for \$100 each. No Refunds! Wristbands are good for daily admission to the grounds and access to the stabling area and Coliseum. Upon receipt and payment in full of your entry, wristbands and parking passes will be mailed with your acknowledgement.

NOTE: It is important to provide your CORRECT ADDRESS to assure timely delivery of admission credentials.

PLEASE PROVIDE THE FOLLOWING WITH YOUR ENTRY BLANK TO EXPEDITE YOUR PROCESS IN THE HORSE SHOW OFFICE.

# HEALTH PAPERS

Presentation of proper health papers is required. Please see the Animal Health Regulations detailed in the Rules & Regulations of the Prize List.,

### MEMBERSHIPS

Failure to present proper USEF or Affiliate Memberships will result in Show Pass or non-member fees being charged. Membership Requirements detailed in the Rules & Regulations of the Prize List.

## SIGNATURES

Owner, Rider, Trainer and Parent/Guardian (if applicable) Signatures are required on the front of this form for the USEF Entry Agreement and ESE Release of Liability and Assumption of Risk Agreement.

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**WARNING:** Under Massachusetts Law, an equine Professional is not liable for an injury to, or death of, a participant in equine activities resulting from the inherent risk of equine activities pursuant to Chapter 128, Section 2D of the General Laws.

# EASTERN STATES EXPOSITION, INC RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Eastern States Exposition, Inc. (hereinafter referred to as "ESE, Inc.") would like to inform all potential equine exhibitors that exposure to equine infectious disease can and has happened. The grounds located at 1305 Memorial Ave., West Springfield, Massachusetts 01089 (hereinafter referred to as "the Fairgrounds") hosts numerous equine events throughout the year, and many equines visit and stable overnight on the Fairgrounds. ESE, Inc. has taken reasonable measures, recommended by the Massachusetts State Veterinarian and Massachusetts Department of Health, to disinfect and prevent the spread of infectious disease among equines visiting the Fairgrounds, however, bringing an equine to the Fairgrounds is not without risk.

STATEMENT OF RISK ASSOCIATED WITH INFECTIOUS DISEASE: Infectious disease is a risk in any venue where equines come from different locations and gather in one centralized location. An equine can be a carrier for many infectious diseases without displaying any symptoms. These carrier equines can then pass the infectious disease to other equines near them or sharing the same space, either at the same time or sometime in the future.

ACKNOWLEDGEMENT OF RISKS: ESE, Inc. feels it is their duty to inform you of these occurrences and the risks associated with them. If you choose to participate in any function held at the Fairgrounds, you do so with full knowledge of the past presence of equine infectious disease. I acknowledge I have read the above notice and I am fully aware of the presence of past equine infectious disease at the Fairgrounds, as well as the possibility of the presence of other infectious diseases which have not been identified. Being fully informed, I have decided of my own free will to participate in an equine function and bring equines onto the Fairgrounds. I, the undersigned for myself, my heirs, my representatives, my assigns, and my next of kin, in consideration of being allowed to bring equines onto the Fairgrounds, do fully and forever release, waive, discharge, hold harmless, and covenant not to sue ESE, Inc. for any and all claims, demands, suits, loss, and causes of action arising from any injury, illness, death, loss of use, or damage of any kind suffered from bringing equines onto the Fairgrounds whether arising from the negligence of ESE, Inc., or otherwise, to the fullest extent of the law, including attorney's fees on appeal.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTOOD ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY WITHOUT ANY INDUCEMENT. I WANT TO BRING EQUINES ONTO THE FAIRGROUNDS.