


Entry #	 July 25-28, 2024 CLOSING DATE: July 11, 2024						MAIL ENTRIES TO: Rose Mount Farm Horse Show PO Box 440, Spotsylvania, VA 22553 ENTRIES ACCEPTED ONLINE: horseshowsonline.com 540-847-6212 rmfshowentries@gmail.com				# Stalls @ \$225	
							USEF Show Pass \$45					
NAME OF HORSE	USEF/USHJA #	BREED	COLOR	SEX	AGE	HGT	PPD # _____ Coggins <input type="checkbox"/> Amount _____ EHV <input type="checkbox"/>				USHJA Show Pass \$30	
							CREDIT CARD INFORMATION Name on Card _____ Signature _____ Card Number _____ Exp ____ / ____ CVV# ____ Billing Zip ____				USEF (\$15 D&M, \$8 USEF)/ USHJA (\$10) Fee \$30	
											Office Fee \$50	
NAME OF RIDER	USEF/USHJA #	SECTIONS/CLASSES		DOB	US CITIZEN						Late Fee \$35	
1st Rider					Y <input type="checkbox"/> N <input type="checkbox"/>						Non-Showing Fee \$100	
2nd Rider					Y <input type="checkbox"/> N <input type="checkbox"/>						Grounds Fee \$50	
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 Rose Mount Farm July (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, 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. If not currently a USEF Active Competing member or Subscriber, I acknowledge that I will be enrolled for no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew in USEF's sole discretion. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. USEF may in its sole discretion, at any time, terminate my USEF Fan status. BY SIGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org , as amended from time to time, as well as 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.							Camper \$125					
							TOTAL					
							OWNER/AGENT				<i>Stabling requests require separate Stabling Reservation form and pre-payment for all stalls.</i>	
							Signature _____					
							Print Name _____					
							Address _____					
							City, State, Zip _____				PRIZE MONEY RECIPIENT INFORMATION MUST BE COMPLETED	
							Phone _____				Taxpayer Name _____	
							Email _____				Social Security or Federal ID # _____	
							USEF# _____				Address _____	
RIDER 1				RIDER 2								
Signature _____				Signature _____								
Print Name _____				Print Name _____								
Address _____				Address _____								
City, State, Zip _____				City, State, Zip _____								
Phone _____				Phone _____								
Email _____				Email _____								
USEF# _____				USEF# _____								
TRAINER				COACH								
Signature _____				Signature _____								
Print Name _____				Print Name _____								
Address _____				Address _____								
City, State, Zip _____				City, State, Zip _____								
Phone _____				Phone _____								
Email _____				Email _____								
USEF# _____				USEF# _____								
Emergency Contact During Show _____ Contact's Phone _____												