

<b>Entry #</b>							April 8-12, 2026 <b>CLOSING DATE:</b> March 30, 2026	<b>MAIL ENTRIES TO: Rose Mount Farm Horse Show</b> PO Box 440, Spotsylvania, VA 22553 <b>ENTRIES ACCEPTED ONLINE:</b> <a href="http://horseshowsonline.com">horseshowsonline.com</a>   540-847-6212 <a href="mailto:rmfshowentries@gmail.com">rmfshowentries@gmail.com</a>	# Stalls @ \$225	
NAME OF HORSE	USEF/USHJA #	BREED	COLOR	SEX	AGE	HGT	PPD # _____ Amount _____	Coggins <input type="checkbox"/> EHV <input type="checkbox"/>	USHJA Show Pass \$30	USEF \$25 USHJA \$10 Total Fee \$35
NAME OF RIDER	USEF/USHJA #	SECTIONS/CLASSES			DOB	US CITIZEN	<b>CREDIT CARD INFORMATION</b>		Office Fee \$50	Late Fee \$35
1st Rider						Y <input type="checkbox"/> N <input type="checkbox"/>	Name on Card _____	Signature _____	Non-Showing Fee \$100	Grounds Fee \$50
2nd Rider						Y <input type="checkbox"/> N <input type="checkbox"/>	Card Number _____	Exp ____ / ____ CVV# _____ Billing Zip _____	Camper \$150	<b>TOTAL</b>
<p><b>FEDERATION ENTRY AGREEMENT</b> By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulteur 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 April Horse Show (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 GR907.4. If not currently a USEF Active Competing member or Subscriber and competing only in classes that are exempt from membership requirements, I acknowledge and agree that I will be enrolled at no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew unless and until USEF determines in its sole discretion to terminate my Fan account. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. I acknowledge that I may opt out at any time by going to My USEF Dashboard or calling (859) 810-8733.</p> <p>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 <a href="http://www.usef.org">www.usef.org</a>, 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.</p>							<b>OWNER/AGENT</b>		<i>Stabling requests require separate Stabling Reservation form and pre-payment for all stalls.</i>	
							Signature		<b>PRIZE MONEY RECIPIENT INFORMATION MUST BE COMPLETED</b>	
							Print Name			
							Address			
							City, State, Zip			
							Phone			
							Email		Taxpayer Name	
							USEF#		Social Security or Federal ID #	
									Address	
									City, State, Zip	
<b>RIDER 1</b>		<b>RIDER 2</b>								
Signature		Signature								
Print Name		Print Name								
Address		Address								
City, State, Zip		City, State, Zip								
Phone		Phone								
Email		Email								
USEF#		USEF#								
<b>TRAINER</b>		<b>COACH</b>								
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 _____										