NAME OF ACTIVITY/S	SCHOOLING SHO	W:	USEA AREA:		
DATE(S) HELD: LOCATION				STATE:	
			gree that my participation is subject, the <i>U.S. Equestrian Federa</i>		nd to those set by the organizer of this
standards currently imposed	by the U.S. Equestr	ian Rules for Eventin		andates that all riders participating in	ards with harness attached that meets cross-country activity wear body-pro-
olicable laws and is solely at activities, including, but not lead the unpredictability of equine collisions with other equines activity organizer, organizing	my own risk. I underst limited to, the propensi e reaction to sounds, su s or objects; and, the po n control over the anim committee, officials, the	and that my participatior ty of equines to behave i udden movements, smell otential of a participant to al. By participating in thi ne USEA, USEF, their office	ninvolves all inherent risks assoc n ways which may result in injur s and unfamiliar objects; person act in a negligent or unskilled m s activity I agree to assume resp cers, agents, employees and the	ciated with the dangers and condition y, harm or even death to humans or on s or other animals; hazards related to anner which may contribute to injury pronsibility for those risks, and I rele wolunteers assisting in the conduct of	surface and subsurface conditions; to the participant or others, including ase and agree to hold harmless the
_	-			tivity; to refuse any entry or application	on; to require and enforce the wearing organizer to be improper or unsafe.
	E (Please Print): _			PARTICIPATE IN THIS ACT	
CITY:				TE: ZIP:	
PHONE:	CI	ELL PHONE:	EMERGENCY CONTACT PHONE:		
FAX:		EMAIL:			
TRAINER'S NAME (A	T THIS EVENT): _			_ PHONE:	
NUMBER OF HORSES	S I WILL BE RIDI	NG DURING ACTIV	ITY (if applicable):		
Current Riding Level	(if applicable):				
Beginner Novice	Novice	Training	Preliminary	Intermediate	Advanced
Check appropriate bo	ox:				
I am a USEA member	and my number is	#:			
 I am not a USEA men					
		and have enclosed m	y membership form and due	9S.	
Check here if part	icipant is under	18 years old.			
SIGNATIIRE:			Date:		

(If participant is under 18, Release must be signed by parent or legal guardian, not by trainer or instructor. This release form is valid only when signed personally by the participant. Signatures of all others, with the exception of a parent or legal guardian of a minor, will not be accepted in the event a claim is filed.)