Entries Close: APRIL 30, 2024 HMI	30, 2024HMI FRIENDSHIP SERIES 2					MAY 29 - JUNE 2, 2024				
TRAINER	ADDRESS				CITY/ST.	ZIP	Date of Birth:	/ /		
HOME # ( ) BARN # ( )		CELL # ( )			BARN NAME					
USHJA# Email										
OWNER ADDRESS					CITY/ST.		ZIP	Date of Birth:	/ /	
HOME # ( ) WORK # ( )	E # ( ) WORK # ( ) CELL # ( )									
USHJA# Email										
R ADDRESS					CITY/ST. ZIP			Date of Birth:	/ /	
HOME # ( ) WORK # ( )	WORK # ( ) CELL # ( )									
USHJA# Email										
HORSE	AGE	COLOR	SEX	HEIGHT	USHJA #		1			
RIDER	CLASSES									
RIDER	CLASSES									
USHJA OUTREACH COMPETITION										
ENTRY AGREEMENT - Release, Assumption of Risk, Waiver, and Indemnification. This document waives important legal rights. Read it					DEPOSIT FEES		Entry Fees			
carefully before signing. I AGREE in consideration for my participation in this Competition to the following: I AGREE that the "Competition"					1 Horse @ \$25		Stall Fees @ \$350			
as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, directors, employees, agents,					Horse Stall @ \$325		Tack Rooms @ \$350			
personnel, volunteers and affiliates. I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, handler					Tack Stalls @ \$325		CA Drug Fees		\$14	
longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse					TOTAL		Non-Stabling @ \$50/day			
sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head							Per horse per da	ay		
injuries, trauma, pain, suffering, or death. ("Harm"). I AGREE to hold harmless and release the USHJA and the Competition from all claim					Stalls will be discounted if horse is only showing in the Outreach/SAHJA classes on Friday,		Outreach Fee		\$2	
for money damages or otherwise for any Harm to me or my horse and fo	Saturday and Sunday.									
if the Harm arises or results, directly or indirectly, from the negligence of	of the USHJA or t	he Competition. I	AGREE to expre	ssly assume all	DECONCE					
risks of Harm to me or my horse, including Harm resulting from the negligence of the USHJA or the Competition. I AGREE to indemnify					831-594-1719		Payment # ( )			
(that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition and to hold them harmless with respect to							If the horse is also showing in ANY classes in HMI Equestrian Challenge.			
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							USE THAT ENTRY BLANK ONLY.			
understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to					Mail Entries 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					Headlands Management, Inc.		Stable With			
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					1 Ivy Street					
on the child's behalf I represent that I have the requisite training, coaching and abilities to safely compete in this competition BY SIGNING					Monterey, CA 93940					
THE BACK, I AGREE to be bound by the terms and provisions of this e										