



2022 FIELDSTONE SHOW PARK

SHOW: PLYMOUTH ROCK WK I | JUNE 22-26, 2022

NO CELL PHONE PHOTOS

PRE-ENTRIES CLOSE JUNE 8, 2022



HORSE'S NAME	USEF/USHJA #	COLOR	SEX	AGE	HEIGHT	PONY SIZE	MEASUREMENT#	STABLING WITH	ARRIVAL DATE
						SM / MD / LG			

OWNER			RIDER ONE			RIDER TWO			TRAINER		
-------	--	--	-----------	--	--	-----------	--	--	---------	--	--

Owner Name			Rider Name			DOB			Trainer Name		
Street Address			Street Address			Street Address			Street Address		
City/Town	State	Zip	City/Town	State	Zip	City/Town	State	Zip	City/Town	State	Zip
Email		Cell Phone #	Email		Cell Phone #	Email		Cell Phone #	Email		Cell Phone #
USEF# /USHJA#	NEHC#	MHC#	USEF# /USHJA#	NEHC#	MHC#	USEF# /USHJA#	NEHC#	MHC#	USEF# /USHJA#	NEHC#	MHC#

Fieldstone Show Park & USEF,NEHC,MHC Entry Agreement
 I have read the USEF Entry Agreement (GR 906.4) as printed in the Prize List for this Competition and agree to all of its provisions. I understand and agree that by entering this Competition, I am subject to Federation Rules, the Prize List, and local rules of the competition. I agree to waive the right to the use of my photos at the competition, and agree that any actions against the Federation must be brought in New York State. Federation Release, Assumption of Risk, Waiver and Indemnification This document waives important legal rights. Read it carefully before signing.

I AGREE in consideration for my participation in this Competition at FSP Halifax, MA to the following: I AGREE that "the Federation" and "Competition" as used herein includes the Licensee and Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm").

I AGREE to hold harmless and release the Federation and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while on the showgrounds prior to, during or after the Competition.

I have read the Federation Rules about protective equipment, including GR801 and if applicable, EV114, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me 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 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 on the child's behalf.

I represent that I have the requisite training, coaching and abilities to safely compete in this competition. I AGREE that if I am injured on the showgrounds prior to, during or after competition, the medical personnel treating my injuries may provide information on my injury and treatment to the Federation on the official USEF accident/injury report form.

BY SIGNING This Entry Form, 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.

WARNING UNDER MASSACHUSETTS LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR THE DEATH OF, A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

5>3EE7E

RIDER TWO

Rider Name			DOB		
Street Address			Street Address		
City/Town	State	Zip	City/Town	State	Zip
Email		Cell Phone #	Email		Cell Phone #
USEF# /USHJA#	NEHC#	MHC#	USEF# /USHJA#	NEHC#	MHC#

5>3EE7E

PRIZE MONEY RECIPIENT

Name			Address		
City/Town			State		
Email	Cell Phone #	S.S. # or Fed ID #	Street Address	City/Town	State
USEF# /USHJA#	NEHC#	MHC#	Street Address	City/Town	State

MANDATORY RIDER SIGNATURE

Signature		
Print Name		
Parent / Guardian Signature (required if rider is a minor)		

MANDATORY TRAINER SIGNATURE

Signature		
Print Name		
Parent / Guardian Signature required if rider is a minor		

MANDATORY OWNER/AGENT SIGNATURE

Signature		
Print Name		
Parent / Guardian Signature (required if rider is a minor)		

MAKE CHECKS PAYABLE TO FIELDSTONE SHOW PARK

Send entries to Charlene Brown
 Mail: 22 South Mayd St. Newport, RI 02840
 Fax: 401-848-2985 | Phone: 401-849-2696
 Email: Cinnbayinc@aol.com
 Credit card must accompany faxed entries

PRE-ENTER ONLINE AT www.horseshowing.com

Red Barn Stall	\$275 x _____ stalls = \$ _____
Premium Tent Stall	\$325 x _____ stalls = \$ _____
Night Watch Fee (Mandatory for stalls)	\$20 _____
Paddock Rental (Based on availability)	\$500 _____
Jumper Nomination Fee	\$175 _____
Late Jumper Nomination	\$225 _____
Office Fee	\$60 _____
USEF Show Pass	\$45 _____
USHJA Show Pass	\$30 _____
Post Entry Fee	\$50 _____
RV Parking (Reservation only)	\$350 _____
Incomplete Entry Fee (Per omission)	\$10 x _____ = \$ _____
Total \$ _____	
Prepaid Cash \$ _____	Check \$ _____
Credit Card \$ _____	

ENTRIES WILL NOT BE EXCEPTED WITHOUT A CREDIT CARD OR CHECK

CREDIT CARD INFORMATION

Credit Card # _____	CV# _____
Expiration Date ____/____	Amount Charged \$ _____
Name on Card _____	ZIP _____
Authorized Signature _____	

MANDATORY MINORS PARENT SIGNATURE

Minor's Parent Emergency Contact # _____	
Parent Signature _____	