Make Checks Payable To:
**Brownland Farm,LLC**
Mail To:
Brownland Farm, PO Box 473, Franklin, TN 37065
Phone: 615-791-8180 Fax: 615-791-8182
www.brownlandfarm.com

# NASHVILLE CLASSIC
## ENTRY FORM
## JUNE 2 - 6, 2010

CLOSING DATE FOR ENTRIES & STALLS: MAY 19, 2010

Only one owner per form. Must be officially entered on an entry form. Stall fees due with entry to guarantee reservation.

| Name of Horse | USEF Reg Number | Sex | Color | Breed | Height | Age |
|---|---|---|---|---|---|---|
| | | | | | | |

| Classes Entered | Name of Rider | Age | USEF # | ASPCA# | USET # |
|---|---|---|---|---|---|
| _____1st Green<br>_____2nd Green | 1st Rider | | | | |
| | 2nd Rider | | | | |

## 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, Vaulter 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 the competition. I agree to be bound by the Bylaws and Rules of the Federation and 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, cable-casts, 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 State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

**Federation Release, Assumption of Risk, Waiver, and Indemnification**
**This document waives important legal rights. Read it carefully before signing.**

**I AGEE** in consideration for my participation in this Competition (Nashville Classic) to the following:

**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 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 caused by me or my horse to others, even if the Harm resulted, 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 at the Competition. I have read the Federation Rules about protective equipment, including GR801 and 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 assume all of the obligations of this Release on the child's behalf.

**I AGREE** that "the Federation" and "Competition" as used above includes all of the officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations.

**I AGREE** that if I am injured at this 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.

I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

**BY SIGNING BELOW, I AGREE to be bound by all applicable Federation Rules and all terms and provisions of this entry blank.**

**Name of Person / Company receiving prize money:** _____

**Social Security or FED ID#** _____

**Please stable with:** _____

| | | |
|---|---|---|
| # _____ | Stall Fee @ $200 | _____ |
| # _____ | Drug ($7) USEF ($8) USHJA ($2) Fee @ $17 | _____ |
| # _____ | USEF Non Member Fee @ $30 | _____ |
| # _____ | USHJA Non Member Fee @ $30 | _____ |
| # _____ | Office Fee @ $45 | _____ |
| # _____ | Late Entry Fee @ $50 | _____ |
| # _____ | Non Showing Stabled Horse Fee @ $100 | _____ |
| # _____ | Paddock Fee @ $225 | _____ |
| # _____ | Grounds Non Stabled Horse Fee @ $40 | _____ |
| # _____ | Jumper Nomination @ $150 | _____ |
| # _____ | Golf Cart Rental (Day @$55, Week @330) | _____ |

We honor: ❑ MasterCard® ❑ VISA® ❑ American Express®

| | | |
|---|---|---|
| **OWNER / AGENT** (mandatory) | **TRAINER** (mandatory) | **RIDER** (mandatory) |
| Signature*(X) _____ | Signature*(X) _____ | Signature*(X) _____ |
| Print Name: _____ | Print Name: _____ | Print Name: _____ |
| Street: _____ | Street: _____ | Street: _____ |
| City: _____ | City: _____ | City: _____ |
| State: _____ Zip Code: _____ | State: _____ Zip Code: _____ | State: _____ Zip Code: _____ |
| Telephone: ( ) _____ | Telephone: ( ) _____ | Telephone: ( ) _____ |
| Owners USEF#: _____ | Trainers USEF#: _____ | Riders USEF#: _____ |

Parent / Gaurdian Signature: (**Required if Rider/Driver/Handler/Vaulter/Longeur is a minor**): _____

Print Parent / Gaurdian Name: _____ Emergency Contact Phone No: ( ) _____

Is Rider/Driver/Vaulter a U.S. Citizen: Yes _____ No _____

CID # _____ Expiration Date ___/___ Month / Year

Card Holder's Name As It Appears On Card

Signature

Street/P.O. Box

City/State/Zip

Telephone