

Please make check payable to: **CJL, Inc** -

SHOW DATE:

Back #	Name of Horse	USEF #	Color	Sex	Ht.	Age	Green Year	Horse/Pony	
							1st 2nd	Sm Md Lg	
Name of Rider #1		Age	USEF #	Classes:					
Name of Rider #2		Age	USEF #	Classes:					
Owner or Authorized Agent				Rider # 1		Trainer			
Owner's Name:				Rider Name:		Trainer Name:			
Address:				Address:		Address:			
Phone #:				Phone #:		Phone #:			
Owner USEF #:				Rider USEF #:		Trainer USEF #:			
Recipient of Prize Money Awards <input checked="" type="checkbox"/>				Name of Individual/Corporation:					
SSN or Tax ID:				Address:					

Entry Fees:	
Classes:	\$
Schooling Fee: <small>\$15 each</small>	\$ 15.00
USEF Fee: <small>(\$8)USEF / (\$15)Drug Fee</small>	\$ 23.00
USEF - \$45 each <small>Show Pass Fee</small>	\$
USHJA - \$30 each <small>Show Pass Fee</small>	\$
USHJA <small>Zone Support Fee</small>	\$ 2.00
Office Fee:	\$ 35.00
Grounds/EMT	\$ 25.00
CREDIT CARD FEE	\$ 3.00
	\$
	\$
TOTAL FEES:	\$

YES, I would like to receive emails about future CJL Events. Email Address: _____

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, Vaultor 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 any CJL INC., SNOWBIRD or HIDDEN RIVER 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, cable - casts, 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 GR908.4. BY SIGNING BELOW, 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.

Credit Card Payments:

Mastercard Discover
 VISA AMEX

Card Account Number _____

Expiration Date _____ Credit Card CVV# _____

Name on Card _____

VENMO @
CLAUDINE-LIBERATORE



I accept and assume the responsibility as put forth by management that I am responsible for taking all social distancing and safety precautions upon myself and any minor I am guardian to, ie: rest rooms, jumps, jump cups, in-gates, out-gates, course boards, ribbons, trophies and anything not listed but is not my personal property, I agree to sanitize and take all pre-cautions. I also agree that the temperature waiver to be submitted is true and I attest to it being accurate and have had no COVID-19 symptoms within 14 days prior to the event date.

VENMO ADDRESS: _____

Rider (Mandatory)	Owner/Agent (Mandatory)	Trainer (Mandatory)	Coach (If applicable)
Signature: _____	Signature: _____	Signature: _____	Signature: _____
Print Name: _____	Print Name: _____	Print Name: _____	Print Name: _____
Is Rider a U.S. Citizen? YES NO			

Parent / Guardian Signature: (required if Rider is a minor): _____

Parent / guardian Print Name: _____

Emergency Contact Phone No: _____