<b>2022</b> <i>DVCTA HA</i>	RVESTFEST ENTI	RY FOR	R <b>M</b>			Official Use Or	nly E	Bridle No.
PER ENTRY FORM	le for duplicating their own ac copies TYPE OR PRINT CLE TA Membership Cards (Rider/Ha			orm. Ti / <b>RIDE</b> I	his is a 2-sided <b>R or HANDLER</b>			
Competition Name:	2022 DVCTA HARV	'ESTFES	Т		Competi	tion Date(s):	Novemb	er 5 & 6 , 2022
·	orse MUST be named)	BREED	COUNTRY (Wh			EIGHT COLOR		DOB
Date of Coggins (must attach copy):	ed Registration mber:	n		you	heck here If this horse is for sale and			
Sire: For Dressage Sport Horse Breedi names required for ALL breed rec	Dar ng (DSHB) classes, Sire, Dam, Dam's gistered horses & recommended for		er Breeder:		Dam	's Sire:		
				):		Alternate Phone	e:	
						-		
			Citizenship*:					
		Alternate Phone:						
Owner's Address:E-Mail:_Trainer:								
	T	rainer's A	ddress:					
	1							
HORSE			ER (At least one)	)	TRAIN	ER C	COACH (if	applicable)
	dvcta#	dvcta#						
<ul> <li>MUST attach copies of US and Registration Certificates and Championship Classes.</li> <li>MUST include a copy of U competing as an Adult Amate Go to http://www.eqverific</li> </ul>	SEF Amateur Certification if eur.	measureme EACH <u>Juni</u> to be a US Statement Non-U.S. c	ent cards) will be request cards) will be request of and <u>Senior</u> particities and the senior particities and the senior of the s	uired to pant (ric ng" Mer Dressa	pay a \$45 Show Þass der, handler, trainer, mber or pay a \$45 S age/DSHB classes M	ich information (with fee which is non-refuce coach and one owner show Pass fee (see the UST attach current present from USEF S	indable. /agent per he he official U	orse) is required SEF Show Pass glish, of current
Class # Day Class I	Name (Level//Division/Test –	if TOC)	GAIG Fee Fee				Fee	Office Use
				┥╽	Subtotal, Class F	-ees		
					Office Fee		\$15.00	
	_				EMT FEE PER HOR		\$ 10.00	
	DVCTA Non-M (\$25.00 per rid							
			Late Fee ADD TO A AFTER RECEIVED					
				] [				
	SUBTOTAL Clas	s Fees	L L		Other Fee(s)			
JR or YR Birthdate: a Jr/YR until the end of the	Rider calendar year in which they	s are eligib / reach the	le to compete as age of 21		ΤΟΤΑ	L FEES DUE:		
	,		-					

**US Equestrian Federation, Inc. Entry Agreement** I have read the United States Equestrian Federation, Inc. (the "Federation") Entry Agreement (GR906.4) as printed in the Prize List for DVCTA HarvestFest ("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 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 at 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 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. 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.

*RIDER/HANDLER (mandat	tory) *OWNER / AGENT (mandatory)				*TRAINER (mandatory)				COACH (If applicable)			
Signature:	Si	Signature:				Signature (must be 18 or older):				Signature:		
Print:	Pr	int:				Print:				Print:		
PARENT/GUARDIAN (Req	uired if rid	er/handler	is a minor, i.	.e. under 1	8)	(Home/P Phone #		nergency	Contac	t Is RIDER a U.S.	citizen? (mandator	y)
Signature:	Pr	int:								YES	NO	_
* No entry is valid wi	ithout orig	inal signa	tures from	the above	ə individu	als; Photo	copied s	ignatures (	or writin	ng "same" are NC	T acceptable.	
S		-					-			NTRY PREPAR	ATION CHECKLIST	Г
Contact NAME and NUMBER for Rider Emergency: / Contact NAME and NUMBER for Horse Emergency: /								Before Mailing, Be Sure You Have:        Completed Both Sides of Entry Form        All Original Required Signatures        Enclosed a Copy of the Current         Negative Coggins (EIA) Certificate (Refer         to Show Specifications for Date Validity				
								Requirements. Cop	• •			
										Supplied all Requir		
Horse Name										Enclosed Copies of and/or USDF Card		
If accompanied by NON-COMPETING HORSE, must complete separate entry form and pay all applicable fees.									Completed the Sta	•		
Tack	n/a									Vaccination Certi Enclosed a Check		
SEND COPY OF SCORE SHEETS FROM APPROVED DVCTA SHOW AS PROOF OF QUALIFICATIONS FOR CHAMPIONSHIP CLASS(ES)									all Applicable Fees. Attached photocopy of Test(s) verifying USDF & FEI Freestyle Test eligibility (ex. for exempt classes)			
ALL ENTRIES MUST HAVE CURRENT COGGINS & FLU / RHINO VACCINATION HISTORY									Documents mpetition (Entry) S Priz	orm, Supplemental s, and Fees to the ecretary Identified on re List.		
ENTER ON LINE AT DVCTA.ORG OR MAIL COMPLETED ENTRY FORM TO: DVCTA C/O DARCY MILLER 210 WHITE HORSE ROAD COCHRANVILLE PA 19330								SC AT	OMEONE WITH T <u>THIS</u> SHOW W	ELL CONTACT # 0 YOU /YOUR GROU /HO IS NOT LISTE <u>THIS</u> ENTRY FOR	UP D	

PLEASE SUBMIT ANY IMPORTANT INFORMATION FOR THE ANNOUNCER ON A SEPARATE SHEET