USEA EDUCATIONAL ACTIVITIES AND SCHOOLING SHOWS
RELEASE FORM

NAME OF ACTIVITY/SCHOOLING SHOW: _____ **USEA AREA:** _____

DATE(S) HELD: _____ **LOCATION:** _____ **STATE:** _____

I have applied to participate in this USEA sponsored educational activity. I agree that my participation is subject to the Conditions in this release and to those set by the organizer of this activity, the regulations and requirements of the USEA and, where applicable, the **U.S. Equestrian Federation Rules for Eventing.**

I agree to wear personal protective equipment when participating in this educational activity. When riding and handling equine, I agree to wear protective headgear passing or surpassing the ASTM/SEI standards with harness attached that meets standards currently imposed by the **U.S. Equestrian Rules for Eventing.** I understand that the USEA mandates that all riders participating in cross-country activity wear body-protecting vests that meet or exceed current USEF rules and the wearing of an approved medical armband or bracelet.

I understand that the sport of eventing is a high risk sport, and that my participation in this educational activity may also involve participation in an "equine activity" as defined by applicable laws and is solely at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the propensity of equines to behave in ways which may result in injury, harm or even death to humans or other animals around or near them; the unpredictability of equine reaction to sounds, sudden movements, smells and unfamiliar objects; persons or other animals; hazards related to surface and subsurface conditions; collisions with other equines or objects; sickness and disease (including communicable diseases); and, the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participant or others, including failing or inability to maintain control over the animal. By participating in this activity **I agree** to assume responsibility for those risks, and **I release** and agree to hold harmless the activity organizer, organizing committee, officials, the USEA, USEF, their officers, agents, employees and the volunteers assisting in the conduct of this USEA educational activity and the owners of any property on which it is to be held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse(s) which I may ride.

I understand and agree that the organizer of this USEA educational activity has the right to cancel this activity; to refuse any entry or application; to require and enforce the wearing of safety or other attire and the conduct of riders, horses and visitors; and to prohibit, stop or control any action during the activity deemed by the organizer to be improper or unsafe.

THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED IF YOU WISH TO PARTICIPATE IN THIS ACTIVITY.

PARTICIPANT'S NAME (Please Print)**:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **CELL PHONE:** _____ **EMERGENCY CONTACT PHONE:** _____

FAX: _____ **EMAIL:** _____

TRAINER'S NAME (AT THIS EVENT): _____ **PHONE:** _____

NUMBER OF HORSES I WILL BE RIDING DURING ACTIVITY (if applicable)**:** _____

Current Riding Level (if applicable)**:**

❑ Beginner Novice ❑ Novice ❑ Training ❑ Modified ❑ Preliminary ❑ Intermediate ❑ Advanced

Check appropriate box:

❑ I am an active USEA member and my number is #:_____

❑ I am not a USEA member and will pay a $20 non-member fee

❑ I am not a USEA member. I wish to join and have enclosed my membership form and dues.

❑ **Check here if participant is under 18 years old.**

SIGNATURE: _____ **Date:** _____

(If participant is under 18, Release must be signed by parent or legal guardian, **not by trainer or instructor.** This release form is valid only when signed personally by the participant. **Signatures of all others, with the exception of a parent or legal guardian of a minor, will not be accepted in the event a claim is filed.**)