



USEA REGISTRATION FOR EVENTING TESTS: YEH/FEH/NEH

Eventing Tests are levels of competitions not defined under the USEF Rules for horse trials, two-day and three-day events. This document refers strictly to: New Event Horse (NEH), Future Event Horse (FEH), and Young Event Horse (YEH) tests.

Unless the Eventing Test is run in conjunction with a USEA recognized horse trials, you are required to contact your Area Chair and notify them of the addition of these events to the calendar.

Under the Fees section below, check the box for the level of publication desired with payment by the appropriate due dates for the applicable publication.

RETURN TO:

USEA | 525 Old Waterford Rd., NW | Leesburg, VA 20176
Fax: (703)779-0550 | Email: klokey@useventing.com

JUDGES:(please list judge(s) being hired/used for NEH/FEH/YEH): _____

*Please refer to the following link for the YEH and NEH Judges List: <http://useventing.com/resource/young-event-horse-judges-list>
Please refer to the following link for the FEH Judges List: <http://useventing.com/resource/future-event-horse-judges-list>
For YEH & NEH, an upper level rider or "Guest Judge" may be used in addition to the YEH Judge for the jumping phases only*

DIVISIONS BEING HELD: (check all that apply):

FEH Yearling FEH 2YO FEH 3YO FEH 4YO YEH 4YO YEH 5YO NEH

ENTRY FEE TO BE CHARGED PER DIVISION: FEH: _____ YEH: _____ NEH: _____

FEES: All fees include insurance coverage

1) _____ Registration and Prize List (e.g. standard horse trials page): \$300 (\$175 event registration, plus \$125 Prize List) If this option is chosen, please contact Sharon Gallagher for further assistance: sharon@useventing.com

2) _____ Registration and line listing on the website calendar page:

i) _____ \$100 one day test registration

ii) _____ \$150 two to four day test registration (additional \$50 fee for tests running two-four days)

Enclosed is my check made payable to USEA in the amount of \$ _____ **OR**

Charge \$ _____ to my Visa Master Card American Express

Credit Card#: _____ Exp. Date: _____ CVV: _____ Billing Zip Code: _____

Name on the Card: _____ Signature: _____

Name of Competition/Test: _____

Address: _____

City: _____ State: _____ Zip: _____

Date(s) of event: _____

Organizer: _____ USEA ID #: _____

Phone: _____ Email: _____

Landowner/Business Name: _____

Address: _____

Check this box if the activity will take place at additional site(s) and attach information on each site. All landowners must be declared on this application and/or the insurance company must be notified, by request, to have them named as Additional Insured prior to the activity taking place. If this is not done, these parties will not be covered by the insurance policy.

Test Organizer: I agree to abide by the policies and directives of the USEA Board of Governors as printed in the "USEF Rules for Eventing" distributed by the USEA and any subsequent addendums.

Signature of Competitions/Test Organizer

Date