



# Prospective “r”, “R”, and “S” Eventing Judges, Technical Delegates, Cross-Country Course Designers, and “R” EVJCDs

## FINAL EXAMINATION REGISTRATION FORM

**OCTOBER 2-4, 2020 | MORVEN PARK | LEESBURG, VA.**

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

USEA MEMBER #: \_\_\_\_\_ USEF MEMBER #: \_\_\_\_\_

### REGISTRATON FEE: \$500 PER LICENSE

**Please check one:**

- |   |                              |                              |                              |
|---|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> I am registering to take the final exam for an Eventing Judge license: | <input type="checkbox"/> “r” | <input type="checkbox"/> “R” | <input type="checkbox"/> “S” |
| <input type="checkbox"/> I am registering to take the final exam for an Eventing TD license:    | <input type="checkbox"/> “r” | <input type="checkbox"/> “R” | <input type="checkbox"/> “S” |
| <input type="checkbox"/> I am registering to take the final exam for an Eventing CD license:    | <input type="checkbox"/> “r” | <input type="checkbox"/> “R” | <input type="checkbox"/> “S” |
| <input type="checkbox"/> I am registering to take the final exam for an EJVCDD license:         |                              | <input type="checkbox"/> “R” |                              |

**Please list any USEF license(s) held:** \_\_\_\_\_

**PAYMENT:**

- Enclosed is my check (Payable to the USEA) to cover the registration fee
- Please charge the fee to my:  Visa  Master Card  American Express

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on credit card: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

### DEADLINE: SEPTEMBER 4, 2020

**MAIL THIS SIGNED REGISTRATION FORM AND PAYMENT BY SEPTEMBER 4 TO:**

Nancy Knight, Director of Education | USEA, 525 Old Waterford Road, NW, Leesburg, VA 20176  
 Questions? Telephone: 703-669-9997 | Fax 703-779-0550 | Email: nancy@useventing.com

I have applied to participate in this USEA/U.S. Equestrian Federation sponsored 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 USEF, and, where applicable, the U.S. Equestrian Federation Rules for Eventing. I release and agree to hold harmless the activity organizer, organizing committee, officials, 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.

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

**PARTICIPANT’S NAME (PLEASE PRINT):** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_