UNITED STATES *Dressage* FEDERATION

Event Participation Agreement

As a Participant and on behalf of myself and my principals, support personal, representatives, employees and agents, I agree that I am subject to the Policies of The United States Dressage Federation (USDF) and the rules of the program, local government and facility (event rules) for _____(Event/Activity) and agree to wear personal protective equipment when participating in the Event/Activity. I will accept as final the decision of the USDF on any question arising under the USDF Policies and event rules, and agree to release and hold harmless the USDF, the Event, the volunteers, directors and employees for any action taken under the Policies and event rules of the Event/Activity. I represent that I am eligible to enter and/or participate under the Policies and event rules. I also agree that as a condition of and in consideration of participating in the Event/Activity, the USDF 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 Event/Activity for the promotion, coverage or benefit of the Event/Activity, sport, USDF or for education purposes. 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.

BY SIGNING BELOW, I AGREE to be bound by all applicable USDF Policies and event rules of the Event/Activity. 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.

Participant (mandatory) Signature: _____

Print Name: _____

Emergency Contact Phone No. _____

Parent/Guardian Signature: (if participant is a minor_____

Print Parent/Guardian Name: _____