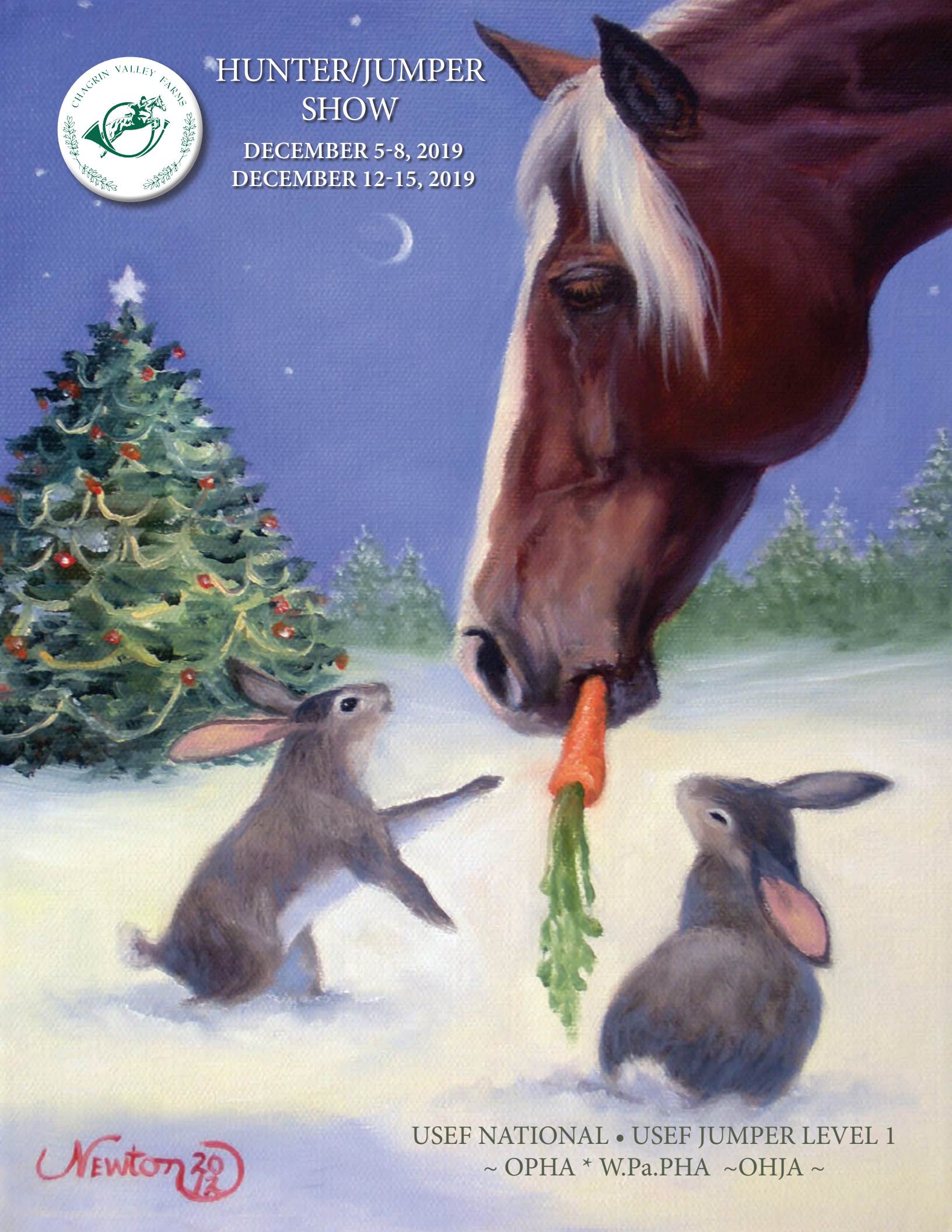




# HUNTER/JUMPER SHOW

DECEMBER 5-8, 2019  
DECEMBER 12-15, 2019



Newton 2012

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~ OPHA \* W.Pa.PHA ~OHJA ~



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The CHAGRIN VALLEY FARMS HORSE SHOW is operated in accordance with the current rules of United States Equestrian Federation, Inc. of which body is a REGULAR Member Competition and is rated "A" in GREEN WORKING HUNTER, HIGH PERFORMANCE WORKING HUNTER, LOW PERFORMANCE WORKING HUNTER, JUNIOR HUNTER, AMATEUR OWNER HUNTER, PONY HUNTER, GREEN PONY HUNTER AND rated "C" in CHILDREN'S HUNTER, CHILDREN'S HUNTER PONY, and ADULT AMATEUR HUNTER. USEF #: 4682, 306535

# ATTENTION COMPETITORS



## USEF SAFE SPORT TRAINING REQUIREMENT

Starting January 1, 2019, if you are a USEF Competing Member 18 years of age or older you are required to complete the core Safe Sport Training within 30 days of activating your membership.

If you do not complete the training, you are ineligible to participate in all USEF activities including competitions.

TAKE the SAFE SPORT TRAINING at [USEF.org](https://USEF.org) by logging into your member dashboard.

#youarenotalone



## CHAGRIN VALLEY FARMS 2019/2020 RATED SHOW SCHEDULE

DECEMBER 5 – 8, 2019....."A" RATED  
 DECEMBER 12 – 15, 2019....."A" RATED  
 JANUARY 16 – 19, 2020....."A" RATED  
 FEBRUARY 13 – 16, 2020....."A" RATED  
 MARCH 5 – 8, 2020....."A" RATED  
 \*APRIL 23 – 26, 2020....."A" RATED  
 JULY 31 – AUG. 2, 2020....."B" RATED  
 AUGUST 28 – 30, 2020....."B" RATED  
 SEPTEMBER 25 – 27, 2020....."A" RATED

**\*\*NEW EVENT\*\* NOVEMBER 17, 2020.....COMBINED TEST (More dates TBD)**

## CHAGRIN VALLEY FARMS 2019/2020 SCHOOLING SHOWS

<u>DRESSAGE</u>		<u>HUNTER</u>		<u>JUMPER &amp; ACADEMY</u>	
November	3, 2019	November	9, 2019	November	10, 2019
December	1, 2019	December	21, 2019	December	22, 2019
December	29, 2019	January	11, 2020	January	12, 2020
January	26, 2020	February	8, 2020	February	9, 2020
February	23, 2020	March	14, 2020	March	15, 2020
March	29, 2020	April	4, 2020	April	5, 2020
*April	19, 2020	May	2, 2020	May	3, 2020
		*May	30, 2020	*May	31, 2020

\*Series end Champion and Reserve Champion will be awarded

### **Chagrin Valley Farms SPONSOR**

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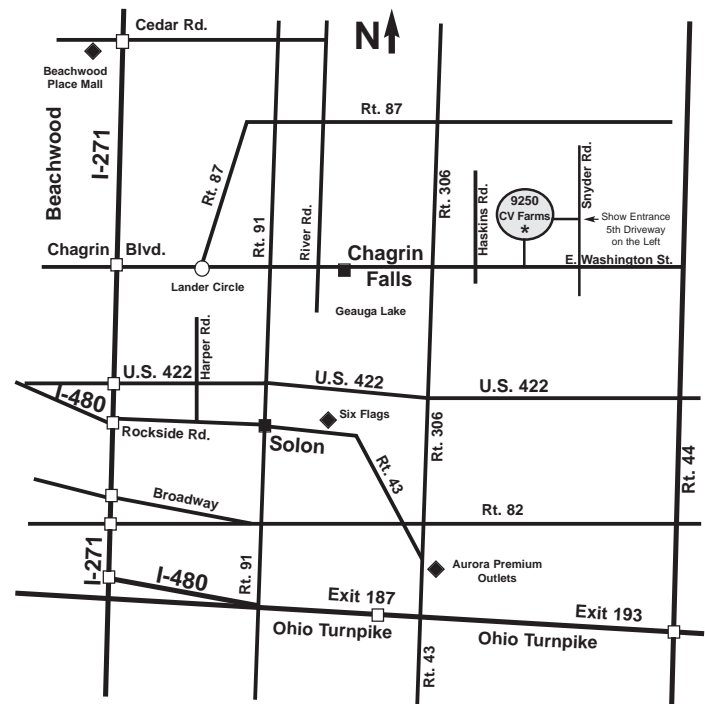
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*About our cover artist: Jeanne Newton Schoborg is an award winning equine artist. Her horse portraits hang in several countries throughout the world including Australia, the Netherlands, and Canada. Her unique style and ability to render all breeds of horse in their natural environment or the show ring is highly recognizable and has made her one of the nation's most sought after equine artists. Jeanne is constantly busy in her studio working on commissions and her unique "free style" and 3-D equine portraits, but is not limited to them only. Her works also include landscapes, seascapes, and surrealism. She and her family live outside Eldora, Iowa along with their horses, cats, and loving dog!*

CHAGRIN VALLEY FARMS  
P.O. BOX 714  
CHAGRIN FALLS, OH 44022  
(440) 543-7233  
[www.chagrinvalleyfarms.com](http://www.chagrinvalleyfarms.com)

The following officials have accepted an invitation to participate in the Chagrin Valley Farms Horse Show. Management reserves the right to vary and add to this list as necessary.

JUDGES:

December 5 – 8, 2019.....	Mr. Scott Williamson (Hunters) Chagrin Falls, OH Mr. John Kline (Jumpers) W. Farmington, OH
December 12-15, 2019.....	Mrs. Anne Scinta-Laise Prospect, KY

STEWARDS: .

December 5 – 8, 2019.....	Ms. Alice Kitson Wixom, MI
December 12-15, 2019.....	Ms. Victoria Veale W. Farmington, OH

SHOW MANAGER:

December 5 – 8, 2019 & December 12-15, 2019.....	Mr. Bernie Villeneuve Chardon, OH
--	--------------------------------------

COURSE DESIGNER:

December 5 – 8, 2019 & December 12-15, 2019.....	Ms. Debbie Proulx Dryden, MI
--	---------------------------------

SECRETARIAL STAFF:

December 5 – 8, 2019 & December 12-15, 2019.....	Ms. Cami Blanchard Northfield, OH
--	--------------------------------------

ANNOUNCER:

December 5 – 8, 2019 & December 12-15, 2019.....	Mr. John Kline W. Farmington, OH
--	-------------------------------------

VETERINARIAN.....	Buckeye Veterinary Burton, OH (440) 834-8821
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FARRIER.....	Mr. Dave Dolensky Shalersville, OH
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EMT.....	To Be Announced
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## RULES & REGULATIONS

### **USEF MEMBERSHIP STATEMENT**

Life, senior active and junior active members shall be eligible to participate in all classes at Regular Competitions, Eventing Competitions at the Preliminary Level or above and Combined Driving Competitions at the Advanced Level, Dressage, Reining and Vaulting Competitions and Endurance Rides. A nonmember may participate as a handler, rider, driver, owner, lessee, agent, coach or trainer at Regular Competitions, Eventing Competitions, Dressage Competitions, Reining Competitions and Combined Driving Competitions upon payment of a \$45 Show Pass fee. Participants in the following classes are exempted from the Requirements of this rule: 1) leadline; 2) exhibitions; 3) games and races; 4) classes for 4-H members; 5) walk trot (exception: Friesian performance FR222) and academy classes (academy classes are classes limited to horses used regularly in a lesson program); 6) USDF introductory level tests, pas de deux and quadrille classes; 7) NRHA Endorsed Reining Competitions. 8) Opportunity classes, 9) citizens of other nations who have proof, in English, of current membership in good standing of their own National Federation, 10) USEA beginner novice division; and 11) assistant handlers in Dressage Sport Horse Breeding classes. Every class offered herein which is covered by the rules and specifications of the current Federation rule book will be conducted and judged in accordance therewith.

### **FEDERATION ENTRY AGREEMENT**

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition 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 competition for the promotion, coverage or benefit of the competition, sport, or the Federation. 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. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4.

### USHJA Horse Registrations

All horses competing in federation non-breed restricted competitions must obtain a Registration Number from USHJA. A registration number for each horse must be entered on all entry forms. Applications for Registration Numbers can be completed on-line or using the Horse Registration application form. See HU101.1 and JP100.2 of the USEF Rule Book.

Minors who do not have a valid driver's license which allows them to operate a motorized vehicle in the state in which they reside will not be permitted to operate a motorized vehicle of any kind including, but not limited to, golf carts, motorcycles, scooters, or farm utility vehicles on the competition grounds of licensed competitions. Minors who have a valid temporary license may operate the above described motorized vehicles as long as they are accompanied by an adult with a valid driver's license. The parent(s), legal guardian(s) or individual who signs the entry blank as a parent or guardian of a minor operating a motorized vehicle in violation of this rule are solely responsible for any damages, claims, losses or actions resulting from that operation. Violations of this rule will be cause for sanctions against the parent(s), guardian(s) and/or trainer(s) who are responsible for the child committing the offense. Penalties may include exclusion of the child, parent(s), guardian(s) and/or trainer(s) from the competition grounds for the remainder of the competition and charges being filed against any of the above individuals in accordance with Chapter 6. Wheelchairs and other mobility assistance devices for individuals with disabilities are exempt from this rule.

## ENTRIES

Entries will close the Monday prior to each show, at which time hay & bedding orders must be submitted. ANY ENTRIES RECEIVED AFTER 5PM THE EVENING BEFORE THE SHOW BEGINS WILL BE CHARGED A \$20 LATE FEE. Entry blanks will be accepted ONLY when signed by the owner or his exhibitor's agent, trainer and rider and accompanied by a check for the STABLING FEES. Be sure to include the USEF Membership Number of your trainer, rider and OWNER'S USEF Membership Number on the entry form. No numbers will be released until proper credentials and all signatures are in order.

All exhibitors in Amateur sections must present their Amateur certification at the office before numbers will be released. Non-member fees will be \$30 each to both USEF and USHJA.

## MEASUREMENTS

All exhibitors in the Pony and Junior Hunter sections must present their measurement cards at the office before numbers will be released. All Pony or Junior Hunters who do not possess a current measurement card will be measured Saturday morning between 7:30am and 9:30am. The actual time will be announced prior to Saturday. The veterinarian will be in attendance for measurements, if needed. The horse show secretary must be notified by Friday, no later than noon, if a measurement is necessary.

## MANAGEMENT

Management reserves the right to cancel or combine classes if insufficient entries warrant. Management reserves the right to refuse any entry in accordance with GR914.

The Chagrin Valley Farms, the owner, their officials and employees will not be responsible for any accident or loss which may occur to an exhibitor, spectator, guest, rider, groom, attendant, or other employee, animal or equipment at the show.

**\*\*THIS WILL BE A CONDITION OF ENTRY TO THE SHOW AND SHOW GROUNDS\*\***

## PLEASE TAKE NOTE

- \* A processing fee of \$20.00 plus collection fees will be made for any non-negotiable checks.
- \* Weekend stabling has priority over day stabling. Day stabling will be charged at \$25 per day/ \$50 per night, if available, regardless of ARRIVAL and DEPARTURE TIMES.
- \* All riders must wear protective headgear while mounted.
- \* All riders and attendants must be neatly and appropriately attired when entering the ring.
- \* No alterations are to be made to permanent stabling or other facilities by exhibitors.
- \* No smoking is permitted in any buildings.
- \* Prize money will be paid by check and mailed within 30 days of the show's completion.
- \* Non-showing horses stabled at the show will be charged a \$50.00 non-showing fee.
- \* A \$25.00 Grounds Fee & a \$20.00 Office Fee will be charged to all entries.
- \* A \$20.00 per horse/per day trailer-in fee will be charged for exhibitors without stalls.
- \* Hay & bedding will be charged at market price plus labor cost.
- \* Dogs must be leashed at all times. Per USEF Rule 1301.6 dogs are not permitted to be loose on competition grounds and must be on a leash or otherwise contained. Individuals must not lead dogs on a leash while mounted. Dog owners are solely responsible for any damages, claims, losses or actions resulting from their dogs' behaviors. Dog owners failing to comply with this rule may be subject to penalty under Chapters 6 and 7, as well as issuance of warning cards.
- \* The show ring may not be available until noon the day before the show.
- \* Any exhibitor who fails to show in a class, in which they are entered, will pay the full entry fee if the proper procedure for scratching a class has not been followed. Entry fee plus an additional \$5.00 will be charged for any exhibitor who shows in a class in which they are not entered.
- \* The area of the courtesy circle may be restricted by a mandatory line that will be indicated on the course diagram and a corresponding barrier will be erected on the course.
- \* Competition management may fine any individuals including trainers, owners, exhibitors, or their agents up to \$100 for improper disposal of needles or other sharp disposable instruments.
- \* **Children must be supervised at all times.**

## REFUNDS-- NO STALL FEES WILL BE REFUNDED.

Entry fees will not be refunded unless a certificate of illness or injury prepared by an accredited veterinarian is presented to the secretary before the start of the show. Once the show has started, horses which are not shown in classes which they have entered, forfeit their entry fees, except if a horse is injured or becomes ill prior to the class or classes that are being scratched. This must be accompanied by a certificate from the official show veterinarian. In either case above, the entry fees will be refunded less an office processing charge of \$20.00. Office & stall fees are nonrefundable.

## PRIZE MONEY DISTRIBUTION

Prize money in all hunter and regular jumper classes, unless otherwise specified, will be distributed 30%, 22%, 15%, 12%, 11%, 10%. NAL/WIHS Jumper Classic prize money will be distributed 25%, 15%, 13%, 12%, 10%, 9%, 8%, 8%.

## CLASS DESCRIPTIONS

All Hunter Classes will be judged on performance and soundness. A Champion and Reserve Champion ribbon will be given in each Hunter section that includes an under-saddle class. The Hunter ring is 80' x 235' with premium dust free footing. The Hunter warm up area is sand footing. A Champion and Reserve Champion will be awarded to the two horses which have acquired the most points in each Jumper section. Three classes must be held in order to award champions. Horses tied for other than first place, the tie shall be broken by the time taken in the first round. The Jumper ring is 80' x 235' with premium dust free footing. The Jumper warm up area is sand footing.

## JUMPER ORDER

A rotating jumping order may be established for all classes over fences. Management reserves the right to draw and post an order of go. Riders or trainers who have conflicts due to multiple entries in a class must see the starter so that necessary adjustments can be made.

## STABLING

10 x 10 vinyl-sided stalls with door in a permanent barn. Stabling will be available at \$25 per day, \$50 for overnight or \$100 per show, if prepaid. The charge will be \$120, if stabling fees are not received in advance of each show. Weekend stalls have priority over day stalls. Stabling is limited and must be reserved in advance. Please remember to bring buckets. Stalls will be available the afternoon before the show. Hay & bedding orders must be given to the show secretary by 1:00 each day for delivery the following day. Please call Linda at (440) 543-2861, to make reservations. **STALL RESERVATIONS WILL NOT BE CONFIRMED UNTIL FULL PAYMENT IS RECEIVED. TACK STALLS MAY BE LIMITED.** For additional information, questions, prize lists or entry forms, please check our website at [www.chagrinvalleyfarms.com](http://www.chagrinvalleyfarms.com) or call (440) 543-2861.

## IMPORTANT NOTICES:

**Concerning splitting/combining and add/scratching policies** in all "A" Rated hunter sections – should entries warrant, all "A" Rated hunter sections will be split or combined following USEF rules and will be done so **at the close of the horse show office on the evening preceding the first class in each section**, therefore entries must be completed for the "A" Rated hunter divisions accordingly to be considered. Any post adds received and accepted after this time will not be considered in respect to the splitting/combining numbers. **There will be no exceptions to this policy. Same day scratches and/or no shows at the gate** in all "A" Rated hunter sections **will forfeit their entry fee** unless the official show veterinarian supplies a certificate warranting a scratch from the show. This certificate must be received by the official show secretary prior to the section in question. Should same day scratches and/or no shows resulting in insufficient entries to keep sections split, sections will be combined.

## CLASSIC ENTRIES WILL NOT BE ACCEPTED AFTER DIVISION STARTS:

Classic entries must be done separately from their division, and must be received by the official show secretary before the start of the division. i.e. when a division is entered, the exhibitor is NOT automatically entered in the Classic unless that specification is made on the entry form.



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### BABY GREEN HUNTER

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Open to horses with limited experience. Fences 2' or 2'3".

ENTRY FEE: \$20.00 per class

Class: 260, 261, 262, 263 Baby Green Hunter      264 Baby Green Hunter Under Saddle

---

### SPECIAL HUNTER

---

Open to all horses and ponies.

ENTRY FEE: \$20.00 per class

Class: 245, 246, 247, 248 Special 2'6" or 2'9"  
249 Special Hunter U/S

---

### VERY GREEN HUNTER

---

Open to horses and ponies in their 1<sup>st</sup> yr at 2'6".

ENTRY FEE: \$20.00 per class

Class: 1, 2, 3, 4 Very Green Hunter 2'6"  
5 Very Green Hunter U/S

---

### GREEN HUNTER

---

A Green Hunter is a horse of any age in his first or second year of showing over 3' or 3'3" fences. Fences not to exceed 3' or 3'3". Classes may be divided by height section 3' and 3'3". You may not show in both height sections at the same competition. Horses may compete in both height sections within the same competition year. See Zone specs in office.

ENTRY FEE: \$22.00 per class

Class: 7, 8, 9, 10 \$40 Green Hunter 3'      Class: 255, 256, 257, 258 \$40 Green Hunter 3'3"  
11 \$40 Green U/S      259 \$40 Green Hunter U/S

---

### \$400 PERFORMANCE HUNTERS 3'3"

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ENTRY FEE: \$40.00 per class

Class: 12, 13, 14, 15 (Handy) O/F 16 U/S

---

### \$500 PERFORMANCE HUNTERS 3'6"

---

ENTRY FEE: \$45.00 per class

Class: 55, 56, 57, 58 (Handy) O/F 59 U/S

---

### \$500 GREEN HUNTER 3'6"

---

Horses to jump 3'6"

ENTRY FEE: \$200.00

Class: 100, 101 102, 103h Green Hunter  
104 Green Hunter U/S

---

### \$500 GREEN HUNTER 3'9"

---

Horse to jump 3'9"

ENTRY FEE: \$200.00

Class: 105, 106, 107, 108h Green Hunter  
109 Green Hunter U/S

---

### \$1100 HIGH PERFORMANCE HUNTER

---

In classes over fences horses will jump 4' – 4'6".

ENTRY FEE: \$250.00 for the section

\$60.00 per class

Class: 105, 106, 107, 108 (Handy) High Performance Hunter  
109 High Performance Hunter U/S

---

### LOW HUNTER

---

All classes to be judged on performance & soundness. Fences approximately 3'.

ENTRY FEE: \$20 per class

Class: 17, 18, 19, 20 Low Hunter      21 Low Hunter U/S

Thursday – 8:00 A.M.

22. Schooling Hunter 2' or 2'3"  
605,606. Suitable Hunter 2' or 2'3"  
260,261. Baby Green Hunter 2' or 2'3"  
264. Baby Green Hunter U/S  
23. Schooling Hunter 2'6" or 2'9"  
245,246. Special Hunter 2'6" or 2'9"  
1,2. Very Green Hunter 2'6"  
316,317. OTTB 2'6" or 3'  
320. OTTB U/S  
5. Very Green Hunter U/S  
249. Special Hunter U/S  
34. Schooling Hunter 3' or 3'3"  
17,18. Low Hunter 3'  
7,8. Green Hunter 3'  
255,256. Green Hunter 3'3"  
11. Green Hunter U/S 3'  
259. Green Hunter U/S 3'3"  
12,13. Performance Hunters 3'3"  
55,56. Performance Hunters 3'6"  
100,101. Green Hunter 3'6" or 3'9"  
104. Green Hunter U/S  
105,106. High Performance Working Hunter  
109. High Performance Working Hunter U/S  
181,182. 2'6" or 2'9" Jumper Table II, 2(b)  
155,156. Training Jumper Table II, 2(b)  
163,164. Low Schooling Jumper II, 2(b)  
169,170. Medium Schooling Jumper II, 2(b)  
166,167. High Schooling Jumper II, 2(b)  
175. \$200 Modified Jumper 4' II, 2(b)

Friday –8:00 A.M.

32. Schooling Hunter 2' or 2'3"  
607,608. Suitable Hunter 2' or 2'3"  
262,263. Baby Green Hunter 2' or 2'3"  
609. Suitable Hunter 2' or 2'3" U/S  
33. Schooling Hunter 2'6" or 2'9"  
247,248. Special Hunter 2'6" or 2'9"  
3,4. Very Green Hunter 2'6"  
318,319. OTTB 2'6" or 3'  
38. Schooling Hunter 3' or 3'3"  
19, 20. Low Hunter 3'  
9, 10\*. Green Hunter 3'  
257,258\*. Green Hunter 3'3"  
21. Low Hunter U/S  
16. Performance Hunters U/S  
59. Performance Hunters U/S  
14,15\*. Performance Hunters 3'3"  
57,58\*. Performance Hunters 3'6"  
102,103\* Green Hunter 3'6" or 3'9"  
107. High Performance Hunter  
108. High Performance Hunter- Handy  
183. 2'6" or 2'9" Jumper Table II.1  
321,322. Novice Child/Adult 2'6"  
157. Training Jumper Table II.1  
195,196. Inter. Child/Adult Jumper II,2(b)  
165. Low Schooling Jumper II.1  
192,193. Low Child/Adult Jumper II, 2(b)  
171. Medium Schooling Jumper II.1  
160,161. Children's/Adult Jumper II, 2(b)  
168. High Schooling Jumper II.1  
172. Low J/A Jumper II,2(b)  
176. \$200 Modified Jumper 4' II.1  
177. \$500 Modified Jumper Classic

\* Handy



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Saturday – 8:00 A.M.

- 323. Novice Child/Adult 2'6"
- 197. Inter. Child/Adult Jumper Table II.1
- 194. Low Children's/Adult Jumper Table II.1
- 162. Children's/Adult Jumper Table II.1
- 180. \$1,500 NAL/WIHS C/A Classic
- 173. Low J/A Jumper II.1
- 174. \$1,500 NAL Low J/A Jumper Classic
- 84. USHJA Jumping Seat Medal 3'3"
- 26. Schooling Hunter 3'3" or 3'6"
- 250,251. Amateur Owner Hunter 3' 3"
- 254. Amateur Owner Hunter U/S
- 110,111. Amateur/Owner Hunter 18-35
- 115,116. Amateur/Owner Hunter 36 & over
- 114. Amateur/Owner Hunter 18-35 U/S
- 119. Amateur/Owner Hunter 36 & over U/S
- 150,151. Junior Hunter 3'3"
- 158. NHS 3'3" Medal
- 154. Junior Hunter U/S
- 120,121. Small Junior Hunter 3'6"
- 125,126. Large Hunter 3'6"
- 85. ASPCA Maclay Medal
- 129. Large Junior Hunter U/S
- 124. Small Junior Hunter U/S
- 90. Flat Equitation 17 & under
- 24. Schooling Hunter 3'
- 65,66. Adult Amateur Hunter 3'
- 159. THIS NHS Adult Medal 3'
- 50,51. Children's Hunter 3'
- 83. National Children's/Fox Smith Medal
- 53. Children's Hunter U/S
- 82. Children's Equitation on the Flat
- 25. Schooling Hunter 2'3" or 2'6"
- 41,42. Non-Professional Hunter 2'3" or 2'6"
- 43. Non-Professional U/S
- 45,46. Low Children's Hunter 2'6"
- 47. Low Children's Hunter U/S
- 80. Low Children's Equitation/Flat
- 31. Open Pony Schooling
- 88. USEF Pony/Gascoigne Medal
- 95. Green Pony Conformation Hunter
- 96. Green Pony Hunter (1<sup>st</sup> round Classic)
- 99. Green Pony Hunter U/S
- 141. Large Pony Conformation Hunter
- 142. Large Pony Hunter (1<sup>st</sup> round Classic)
- 145. Large Pony Hunter U/S
- 89. Pony Equitation on the Flat
- 136. Medium Pony Conformation Hunter
- 137. Medium Pony Hunter (1<sup>st</sup> round Classic)
- 140. Medium Pony Hunter U/S
- 130. Small Pony Conformation Hunter
- 131. Small Pony Hunter (1<sup>st</sup> round Classic)
- 134. Small Pony Hunter U/S

Sunday – 8:00 A.M.

- 29. Schooling Hunter 3'3"- 3'6"
- 252,253\* Amateur Owner Hunter 3' 3"
- 112,113\* Amateur/Owner Hunter 18-35
- 117,118\* Amateur/Owner Hunter 36 & over
- 400. \$1000 Amateur/Owner Hunter Classic
- 152,153\* Junior Hunter 3'3"
- 122,123\* Small Junior Hunter
- 127,128\* Large Junior Hunter
- 300. \$1000 Junior Hunter Classic
- 86. Dover Saddlery/USEF/OPHA Medal
- 39. Schooling Hunter 3'
- 87. Ariat Medal (NAHRA) 3'
- 67. Adult Amateur Hunter (1<sup>st</sup> round Classic)
- 700. Adult Classic (2<sup>nd</sup> round NAL/WIHS)
- 68. Adult Amateur Hunter U/S
- 91. Adult Equitation on the Flat
- 52. Children's Hunter (1<sup>st</sup> round Classic)
- 600. Children's Classic (2<sup>nd</sup> round NAL/WIHS)
- 27. Schooling Hunter 2'6" or 2'9"
- 92, 93. 2'6" or 2'9" Equitation
- 60,61. Low Adult Amateur 2'6"
- 62. Low Adult Hunter U/S
- 94. 2'6" & 2'9" Equitation on the Flat
- 63. Low Adult Equitation on the Flat
- 48. Open Pony Schooling
- 97,98. Green Pony Hunter
- 900. Green Pony Classic
- 143,144\* Large Pony Hunter
- 138,139\* Medium Pony Hunter
- 132,133\* Small Pony Hunter
- 800. Pony Hunter Classic (2<sup>nd</sup> round)
- 28. Schooling Hunter 2' or 2'6"
- 76,77,78. Children's Pony Hunter
- 79. Children's Pony Hunter U/S
- 75. Children's Pony Hunter Flat Eq.  
\*Handy
- 30. Schooling Hunter 2'
- 35,36. Short Stirrup Hunter 2'
- 37. Short Stirrup Hunter U/S
- 81. Short Stirrup Equitation on the Flat





\$2000 A/O HUNTER 3'3"	\$2,000 A/O HUNTERS 3'6"
To be ridden by Amateur Owners or an Amateur member of the owner's family. Less than three entries in the A/O 3'3", A/O 3'6" or the Junior Hunter section, these sections may be combined. HU115.1.c	
ENTRY FEE: \$200.00 for this section	ENTRY FEE: \$200.00 for this section
Class: 250, 251, 252, 253 A/O Hunter 3'3" 18-35	Class: 110, 111, 112, 113 A/O Hunter 18-35
Class: 254 A/O Hunter U/S 18-35	114 A/O Hunter U/S 18-35
Class: 930, 931, 932, 933 A/O Hunter 3'3" 36 & O	Class: 115, 116, 117, 118 A/O Hunter 36 & Over
Class: 934 A/O Hunter U/S 36 & O	Class: 119 A/O Hunter U/S 36 & Over

**\*\*\*\$1000 AMATEUR OWNER HUNTER CLASSIC\*\*\***

Round 1 will be the 2<sup>nd</sup> over fences class on Saturday.

CLASS: 400 – Entry Fee \$100.00

Nomination Fee: \$25.00

**\$4,000 JUNIOR HUNTERS**

If there are less than three entries in the A/O 3'3", A/O 3'6" or the Junior Hunter section, these sections may be combined. HU111.7

SMALL JUNIOR HUNTER	LARGE JUNIOR HUNTER
ENTRY FEE: \$200.00 for this section.	Fences 3'3"
Class: 150, 151, 152, 153 O/F 154 U/S	Class: 226, 227, 228, 229 O/F 230 U/S
SMALL JUNIOR HUNTER	LARGE JUNIOR HUNTER
ENTRY FEE: \$200.00 for this section	Fences 3'6"
Class: 120, 121, 122, 123 O/F 124 U/S	Class: 125, 126, 127, 128 O/F 129 U/S

**\*\*\*\$1000 JUNIOR HUNTER CLASSIC\*\*\***

Round 1 will be the 2<sup>nd</sup> over fences class on Saturday.

CLASS: 300 – Entry Fee \$100.00

Nomination Fee: \$25.00

SHORT STIRRUP HUNTER	ADULT RIDER HUNTER
Open to riders 12 years of age and under.	Open to adult riders. Fences 2'
May not cross-enter into any other recognized division at the same show. No in & out.	
ENTRY FEE: \$18.00 per class	ENTRY FEE: \$18.00 per class
Class: 35, 36 Short Stirrup Hunter	Class: 205, 206 Adult Rider Hunter
37 Short Stirrup Hunter U/S	207 Adult Rider Hunter U/S

**NON-PROFESSIONAL HUNTER**

Open to riders of all ages on horses or ponies who are still eligible as Juniors or Amateurs. 2'3" or 2'6".

ENTRY FEE: \$20.00 per class

Class: 41, 42 Non-Professional Hunter 43 Non-Professional Hunter U/S

**SCHOOLING HUNTER**

Management reserves the right to limit entries, all classes to be judged on performance and soundness.

ENTRY FEE: \$20.00 per class.

Class: 22. 2' or 2'3"	26. 3'3" or 3'6"	30. 2'	34. 3' or 3'3"
23. 2'6" or 2'9"	27. 2'6" or 2'9"	31. 2'3", 2'6", 2'9", or 3'	38. 3' or 3'3"
24. 3'	28. 2'	32. 2' or 2'3"	39. 3'
25. 2'3" or 2'6"	29. 3'3" or 3'6"	33. 2'6" or 2'9"	48. Open Pony
301. Red/Blue Schooling			Schooling

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### LOW CHILDREN'S HUNTER

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Open to junior riders. Riders may not cross enter into any division in which fence height exceeds 2'6". Fences 2'6".

ENTRY FEE: \$20.00 per class

Class: 45, 46 Low Children's Hunter

47 Low Children's Under Saddle

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### CHILDREN'S HUNTER HORSE

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Open to Junior Exhibitors. See Zone specs in office.

ENTRY FEE: \$100.00 for this section

Individual Classes \$25.00

Class: 50, 51, 52 \$50 Children's Hunter

53 \$50 Children's Hunter Under Saddle

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Class: 600 \$500 USEF/NAL/WIHS Children's Hunter Classic Entry Fee: \$50.00

\*The first round will be combined with class 51. Proper attire required. Riders do not need to be members, but only members will receive points towards the respective finals.

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### LOW ADULT HUNTER

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Open to horses ridden by Amateurs 18 years of age or older who have limited experience over fences. To be judged on performance and soundness with emphasis on manners. Fences 2'6".

ENTRY FEE: \$20.00 per class

Class: 60, 61 Low Adult Hunter

62 Low Adult Hunter Under Saddle

~~~~~  
Class: 500 \$500 CVF 2'6" Hunter Derby (Non-Pro) Entry Fee: \$50.00

The intent of this class is to provide the intermediate rider who competes in the 2'6" hunter, jumper, equitation, & pony divisions, with the same derby riding experience as those offered at higher levels. Professionals are not allowed to participate. No in & outs. Two round format.

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### ADULT AMATEUR HUNTER

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To be ridden by Amateurs who are members of USEF. See Zone specs in office.

ENTRY FEE: \$100.00 for this section

Individual Classes \$25.00

Class: 65, 66, 67 \$50 Adult Amateur Hunter 18-35

Class: 70, 71, 72 \$50 Adult Am. Hunter 36 & over

68 Adult Amateur Under Saddle 18-35

73 Adult Amateur Under Saddle 36 & over

~~~~~  
Class: 700 \$500 USEF/NAL/WIHS Adult Hunter Classic Entry Fee: \$50.00

\*The first round will be combined with class 67. Proper attire required. Riders do not need to be members, but only members will receive points towards the respective finals.

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### NAL/WIHS HUNTER CLASSICS – USEF Rated

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Each classic will be a two round competition. An open numerical score will be given. The first round will consist of at least nine fences. The twelve highest scoring entries will be asked back, in reverse order, to compete over a second round course. The scores of both rounds will be averaged together to determine a winner.

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### CHILDREN'S HUNTER PONY

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Open to Junior Exhibitors. See Zone specs in office.

ENTRY FEE: \$25.00 per class

Class: 76, 77, 78 \$50 Children's Pony Hunter

79 \$50 Children's Pony Hunter U/S

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**\$500.00 SMALL PONY 2'3"**

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ENTRY FEE: \$125.00 for this section

Class: 130 Small Pony Conformation Hunter  
131, 132, 133 (Handy) Small Pony Hunter  
134 Small Pony Hunter U/S

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**\$500.00 MEDIUM PONY 2'6"**

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ENTRY FEE: \$125.00 for this section

Class: 136 Medium Pony Conformation Hunter  
137, 138, 139 (Handy) Medium Pony Hunter  
140 Medium Pony Hunter U/S

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**\$500 LARGE PONY 2'9" - 3'**

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ENTRY FEE: \$125.00 for this section

Class: 141 Large Pony Conformation Hunter  
142, 143, 144 (Handy) Large Pony Hunter  
145 Large Pony Hunter U/S

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**\$375 SM/MED GREEN PONY**

**\$375 LARGE GREEN PONY**

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A green pony is a pony of any age not exceeding 14.2 hands that has not been shown over fences the regulation height or higher for its respective section at a Regular Member competition.  
Fences: Smalls 2'3", Mediums 2'6", Larges 2'9". Sections with less than four entries will be combined.

ENTRY FEE: \$125

Class: 96, 97, 98 Green Pony Hunter  
95 Green Pony Conformation Hunter

99 Green Pony Hunter U/S

**\$500 GREEN PONY HUNTER CLASSIC**

Round 1 will be the 2<sup>nd</sup> over fences class on Saturday for each pony section.

CLASS: 900 – Entry Fee: \$50.00  
Nomination Fee: \$25.00

**\$500 PONY HUNTER CLASSIC**

Round 1 will be the 2<sup>nd</sup> over fences class on Saturday for each pony section.

CLASS: 800 – Entry Fee: \$50.00  
Nomination Fee: \$25.00



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Dentistry**



Phone: 440-356-9550

E-mail: [info@valleyequinedentistry.com](mailto:info@valleyequinedentistry.com)

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## HUNTER SEAT EQUITATION

All classes to be judged on seat, hands, guidance and control of the mount.

Eight ribbons will be awarded in each class.

Class: 80. LOW CHILDREN'S EQUITATION/FLAT-Entry fee \$18.00.

81. SHORT STIRRUP EQUITATION/FLAT-Short stirrup riders 12 & under. Fee \$18.00.

63. LOW ADULT EQUITATION/FLAT—Entry fee \$18.00.

208. ADULT RIDER EQUITATION/FLAT—Entry fee \$18.00.

204. LIMIT RIDER EQUITATION/FLAT—Entry fee \$18.00.

82. CHILDREN'S EQUITATION/FLAT-Riders eligible for the Children's division. To be shown at a walk, trot & canter both ways of the ring. Test 1-7 optional. Entry fee \$20.00.

83. T.H.I.S. NATIONAL CHILDREN'S MEDAL (FOX SMITH MEDAL)-

Open to all Junior members of the USEF & CEF who never competed in a National Equitation Final with fences at 3'6" (ie. USEF MEDAL, ASPCA MACLAY, USET, CET or CEF Finals, WIHS Capital Cup). Riders may not compete in the Show Circuit Magazine Children's Medal Finals and any final with fences at 3'6" in the same year. To be shown over a minimum of eight fences 2'9" to 3' in heights. Spreads not to exceed fence height. The course may be either a Jumper or Hunter type course and must include at least two changes of direction & combination. Water obstacles are not permitted. The top four riders or 20% of the first round competitors, whichever is greater, are required to perform at least two individual tests from USEF tests 1-19. An open Numerical Scoring System must be used in the first round, with each rider's score announced at the completion of their round. The riders who will be invited to compete in the finals will be chosen as follows: the high point rider in each of the 5 regional series will be invited, along with the top 30 riders from the National Standings list. There will not be an entry fee for the finals. Entry fee \$30.00.

158. NHS 3'3" MEDAL-See USEF Rule Book for specifications. Entry fee \$40.00.

159. THIS NHS ADULT MEDAL 3'-See USEF Rule Book Specs. Entry fee \$40.00.

85. ASPCA HORSEMANSHIP CLASS-See USEF Rule Book for specs. Entry fee \$40.00.

86. DOVER SADDLERY/U. S. HUNTER SEAT MEDAL (OPHA MEDAL)

See USEF Rule book for specifications. Test 1-19 optional. Entry fee \$40.00.

87. ARIAT NATIONAL ADULT MEDAL (NAHRA MEDAL)-Open to all Amateur riders except Amateur Owners. Fences 3'. To be shown over a minimum of eight hunter fences 2'9" - 3'3". USEF tests 1-19. Entry fee \$30.00.

88. MARSHALL & STERLING USEF PONY MEDAL (DICK GASCOIGNE MEDAL)-see USEF Rule Book for Specifications. Entry fee \$40.00.

89. PONY EQUITATION/FLAT-To be shown at walk, trot and canter, both ways of the ring. Test 1-7 optional. Entry fee \$20.00.

90. FLAT EQUITATION 17 AND UNDER-Riders to walk, trot and canter, both ways of the ring. Light contact with the horse's mouth is required to perform additional tests. Test 1-19 optional. Entry fee \$20.00.

91. ADULT EQUITATION/FLAT-Riders to walk, trot and canter, both ways of the ring. Entry fee \$20.00.

75. CHILDREN'S PONY EQUITATION/FLAT-Open to riders that are eligible for the Children's Pony division. Entry fee \$20.00.

92,93. 2'6" OR 2'9" EQUITATION OVER FENCES—Entry fee \$16.00.

94. 2'6" OR 2'9" EQUITATION FLAT—Entry fee \$16.00

84. USHJA 3'3" JUMPING SEAT MEDAL—See specifications—Entry fee \$40.00.

302. EQUITATION O/F--over jumper rails. All heights offered—Entry fee \$20.00.

## JUMPER DIVISIONS

Nomination Fee: \$100.00

Nominated horses are eligible to compete in LOW JUNIOR/AMATEUR JUMPER & MODIFIED JUMPER divisions. Horses entered in these sections must be registered with the UHJA in accordance with JP100.2. Horses tied for other than first place, the tie shall be broken by time taken in the first round. The nomination fee applies to above sections.

| 2'6" or 2'9" JUMPERS             | TRAINING JUMPER                  |
|----------------------------------|----------------------------------|
| Fences 2'6" or 2'9"              | Fences 3'                        |
| ENTRY FEE: \$20.00               | ENTRY FEE: \$20.00               |
| CLASS: 181, 182 – Table II, 2(b) | CLASS: 155, 156 - Table II, 2(b) |
| 183            Table II.1        | 157            Table II.1        |

| INTERMEDIATE CHILD/ADULT JUMPER                                | LOW CHILDREN'S/ADULT JUMPER      |
|----------------------------------------------------------------|----------------------------------|
| Open to horses and ponies to be ridden by a Junior or Amateur. |                                  |
| Fences 3'                                                      | Fences 3'3"                      |
| ENTRY FEE: \$20.00                                             | ENTRY FEE: \$20.00               |
| CLASS: 195, 196 – Table II, 2(b)                               | CLASS: 192, 193 – Table II, 2(b) |
| 197            Table II.1                                      | 194            Table II.1        |

| CHILDREN'S/ADULT AMATEUR JUMPER                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fence heights to be set at 1.15m. Sections may be divided by age of rider and may also be combined (Children's with Adult Amateur sections) if so stated in the prizelist. Children's/Adult Amateur riders may not cross enter into High Junior or Amateur/Owner classes or any other jumper class exceeding 1.30m at the same competition with the exception of classes which do not offer prize money (including addback money) see HU111 and HU108 for cross entry restrictions. |
| ENTRY FEE: \$20.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| CLASS: 160, 161 - Table II, 2(b)                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| CLASS: 162            Table II.1                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

### \*\*\*\$1,500 NAL/WIHS CHILDREN'S/ADULT JUMPER CLASSIC\*\*\*

A rider need not be a member of the North American League to compete, but only current members will accrue points toward year-end finals to be held at the Pennsylvania National Horse Show. **Horse and rider combination must be entered in at least one division class.** To be conducted and scored under Table II, 2(a/b) - Time first Jump-Off. Class specifications as stated in current Zone specs. Proper attire required. **Nomination Fee: \$25.00**      Fences 1.15m.  
ENTRY FEE: \$120    CLASS: 180

| LOW SCHOOLING JUMPER             | MEDIUM SCHOOLING                 | HIGH SCHOOLING JUMPER            |
|----------------------------------|----------------------------------|----------------------------------|
| Fences 3'3"                      | Fences 3'6"                      | Fences 4'                        |
| ENTRY FEE: \$20.00               | ENTRY FEE: \$20.00               | ENTRY FEE: \$20.00               |
| CLASS: 163, 164 - Table II, 2(b) | CLASS: 169, 170 - II,2(b)        | CLASS: 166, 167 – II, 2(b)       |
| CLASS: 165            Table II.1 | CLASS: 171            Table II.1 | CLASS: 168            Table II.1 |

| LOW JUNIOR/AMATEUR JUMPER                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Horses in this section must be ridden by an Amateur Owner or Amateur member of the owner's family or by a Junior exhibitor. Class 172 - Table II, 2(b) Class 173 - Table II.1. Class 174- Table II, 2(a).<br>Fences 1.25 meters. Min. speed 382 yards/min. |

ENTRY FEE: \$40.00    #172, 173            Low Junior/Amateur Jumper  
\$120.00 #174            \$1500 NAL Low Junior/Amateur Jumper Classic

| MODIFIED JUMPER                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------|
| Open to all horses. Class 175 – Table II, 2(b). Class 176 - Table II.1. Class 177 - Table II, 2(a/b)<br>Fences 4'. Min. speed 382 yards/min. |

ENTRY FEE: \$60.00    #175, 176\$200 Modified Jumper  
ENTRY FEE: \$80.00    #177            \$500 Modified Classic

Make checks payable to:  
Chagrin Valley Farms, P.O. Box 714, Chagrin Falls, OH 44022

Arrival Date

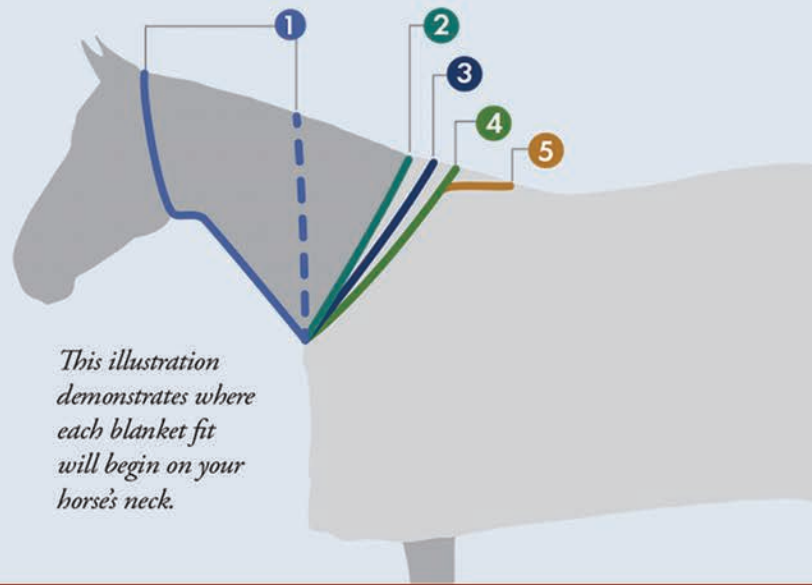
Departure Date

No.

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| Horse's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          | Horse's USEF #             |                         |                     |                            | Color                    |                          | Height                         |                                  |                               |                                 | Measurement Card                     |                                      |                                  |                                                                         | A-O Age                  |  |
| USE RIDER<br>NUMBER (#1<br>or #2)TO<br>INDICATE<br>Section and<br>Rider                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Low<br>Working<br>Hunter | Baby<br>Green<br>Hunter    | Very<br>Green<br>Hunter | Open<br>Hunter      | Junior<br>Hunter<br>3'3"   | Amateur<br>Owner<br>3'3" | Amateur<br>Owner<br>3'3" | Amateur<br>Owner<br>3'3"       | Amateur<br>Owner<br>3'3"         | Amateur<br>Owner<br>3'3"      | Amateur<br>Owner<br>3'3"        | Amateur<br>Owner<br>3'3"             | Amateur<br>Owner<br>3'3"             | Amateur<br>Owner<br>3'3"         | Amateur<br>Owner<br>3'3"                                                | Amateur<br>Owner<br>3'3" |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Pregreen<br>Hunter<br>3' | Pregreen<br>Hunter<br>3'3" | Green<br>Hunter         | Childrens<br>Hunter | Low<br>Childrens<br>Hunter | Special<br>Hunter        | Non<br>Pro               | Childrens<br>Flat<br>Eq<br>#75 | Limit Rider<br>Flat<br>Eq<br>#92 | Short<br>Stirrup<br>Eq<br>#81 | Pony<br>Eq<br>Flat<br>Eq<br>#89 | Childrens<br>Eq<br>Flat<br>Eq<br>#82 | Low Child<br>Eq<br>Flat<br>Eq<br>#80 | Adult<br>Eq<br>Flat<br>Eq<br>#91 | Write in Class<br>Numbers and rider<br>number for<br>Individual Classes |                          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                            | 1                       | 2                   |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
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| Classes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Sections                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| United States 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 this 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. 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:<br>I AGREE that the "Federation" and "Competition" as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations. 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. |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| TOTAL ENTRY FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
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| STALLS: PREPAID: \$100.00<br>WEEKEND AT SHOW: \$120.00<br>OVERNIGHT: \$50.00; DAY: \$25.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| TACK STALL \$100.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| NON-SHOWING HORSE \$50.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| SHOW PASS FEE (please circle)<br>USHJA: \$30.00<br>USEF: \$45.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| USEF DRUG TESTING FEE PER HORSE (D & M: \$15.00; USEF: \$8.00) \$23.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| NOMINATING FEE: \$100.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| USHJA Zone Support Fee \$ 7.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| GROUNDS FEE \$25.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| TRAILER IN FEE \$20.00 PER DAY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| OFFICE FEE \$20.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
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| RCVD. CHK. # CHK. # Total Amount Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Amount Enclosed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Balance Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Owner USEF# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Owner _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Street Address _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| City/State/ZIP _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Phone /Fax# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| SS#/TIN# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Name Associated with SS/TIN _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Owner/Agent Signature _____ Coach _____ Coach USEF# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Coach Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Rider #1 _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| DOB _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| USEF# _____ ASPCA# _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Street Address _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| City/State/ZIP _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Rider/Agent Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Parent Signature (for junior riders) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |
| Emergency Contact Phone No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                            |                         |                     |                            |                          |                          |                                |                                  |                               |                                 |                                      |                                      |                                  |                                                                         |                          |  |



# NOTHING **FITS** LIKE A SCHNEIDERS BLANKET!



*This illustration demonstrates where each blanket fit will begin on your horse's neck.*

## 1 EXTRA COVERAGE EURO

- No back seam
- **Extra coverage** against wind and rain with high neck or permanently attached neck cover
- Perfect for all breeds



## 2 PATENTED VTEK® WITHER RELIEF

- Uniquely designed for **Upright Shoulder Conformation**
- Raised, shaped area over withers, extends 6-8" onto the mane
- Perfect for Thoroughbreds, Warmbloods & Appendix horses



## 3 CONTOUR COLLAR EURO

- Shaped collar for a **Snugger Fit Around the Neck**
- extends 4-6" onto the mane
- Perfect for all breeds



## 4 PATENTED FITTED V-FREE®

- Uniquely designed for **Sloped Shoulder Conformation**
- Raised, shaped area over withers up to the start of the mane
- Perfect for Quarter Horses, Stock Horse breeds & Arabians



## 5 CUTBACK

- Uniquely designed for **Upright Head Carriage**
- Cut away at withers for a rub free fit
- Perfect for Arabians, Friesians, Saddlebreds & Tennessee Walkers



*Stop by or call today  
to find out more!*

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Sat 10 AM – 6 PM  
Sun Noon – 6 PM

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# SCHNEIDERS

Value Priced Horse Supplies Since 1948

8255 E. Washington St., Chagrin Falls, OH 44023





shaped  
collar for a  
**Snugger Fit  
Around the  
Neck**

**Contour Collar Euro Turnouts**



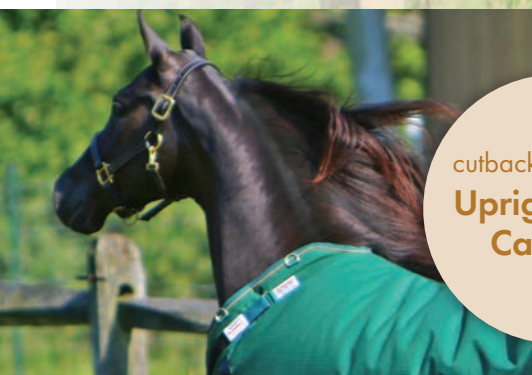
VTEK®  
wither relief to fit  
**Upright  
Shoulder  
Conformation**

**VTEK® Wither Relief Turnouts**



Fitted V-Free®  
wither relief to fit  
**Sloped  
Shoulder  
Conformation**

**Fitted V-Free® Turnouts**



cutback wither to fit  
**Upright Head  
Carriage**

**Cutback Turnouts**



no back seam to  
**Guard Against  
Leakage**

**Extra Coverage Euro Turnouts**

great fitting blankets  
keep your horse  
**WARM, COMFORTABLE  
AND PROTECTED**



(pictured)  
**VTEK®  
Marathon**

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