



Prospective “r”, “R”, and “S” Eventing Judges, Technical Delegates, Cross-Country Course Designers, and “R” EVJCDs
FINAL EXAMINATION REGISTRATION FORM
 SEPTEMBER 23-25, 2022 | STABLEVIEW FALL HORSE TRIALS | AIKEN, SC

FULL NAME: _____ USEA MEMBER #: _____
 ADDRESS: _____ USEF MEMBER #: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 PHONE: EMAIL: _____

REGISTRATION FEE: \$500.00 PER LICENSE

Lunch is not provided. A lunch break will be scheduled.

Please check one:

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

Please list any USEF license(s) held: _____

PAYMENT:

- Enclosed is my check (Payable to the USEA) to cover the registration fee
 Please charge the fee to my: Visa Master Card American Express
 Credit Card #: _____ Expiration Date: _____ CVV: _____
 Name as it appears on credit card: _____ Zip Code: _____
 Signature of card holder: _____

DEADLINE: AUGUST 19, 2022

MAIL THIS SIGNED REGISTRATION FORM AND PAYMENT BY AUGUST 19, 2022 TO:
 Nancy Knight, Sr. Director of Education | USEA, 525 Old Waterford Road, NW, Leesburg, VA 20176
 Questions? Telephone: 703-669-9997 | Fax 703-779-0550 | Email: nancy@useventing.com

I have applied to participate in this USEA/U.S. Equestrian Federation sponsored activity. I agree that my participation is subject to the conditions in this release and to those set by the organizer of this activity, the regulations and requirements of the USEA and USEF, and, where applicable, the U.S. Equestrian Federation Rules for Eventing. I release and agree to hold harmless the activity organizer, organizing committee, officials, and the owners of any property on which it is to be held, from all liability for negligence resulting in accidents, damage, injury, or illness to myself and to my property.

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

PARTICIPANT’S NAME (PLEASE PRINT): _____
 PARTICIPANT’S SIGNATURE: _____ DATE: _____