



Fax to 303-479-9439  
www.horseshowing.com  
carole@kenneyshows.com

## COTTONWOOD RIDING CLUB'S CELEBRATION OF THE HORSE

May 31-June 2, 2019

Horse CHJA #	Horse Name:	Sex	Foaling Date	Color	Age	Height	Size	Green Year
Primary Owner Name:		CHJA#	DOB	Owner Email Address:				
Owner Address		City/State/Zip		Cell Phone:	Home Phone:	Emergency Phone:		
Rider #1 Name:		CHJA#	DOB	Rider #1 Email Address:				
Rider #1 Address		City/State/Zip		Cell Phone:	Home Phone:	Emergency Phone:		
Rider #1 Classes by Number								
Rider #2 Name:		CHJA#	DOB	Rider #2 Email Address:				
Rider #2 Address		City/State/Zip		Cell Phone:	Home Phone:	Emergency Phone:		
Rider #2 Classes by Number								

I hereby indemnify and hold harmless Kenney Show Management Services, Cottonwood Riding Club, its management, CHJA and its Board of Directors, from any liability arising from accident, injury, theft or damage to me, my representatives or helpers, all equipment and all animals under my jurisdiction during this show.

### WARNING

Under Colorado Law, an equine professional is not liable for injury or death of a participant in equine activities from the inherent risks of equine activities, pursuant to section 13-21-119, Colorado Revised statutes.

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.

Show Fees:	Qty	Amount
All fees included in class price!		
Total		

X

Rider / Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Print Parent/Guardian Name: \_\_\_\_\_

Trainer:	CHJA#	Cell #	Email Address:
Address:	City/State/Zip		Trainer Signature
Taxpayer Name:	Address/City/State/Zip		SS# or TIN