



Myshowentry303@gmail.com  
Smart Phone picture 303-520-4410

‘CROSS THE MEADOW II  
Windhoek Equestrian Center  
9850 E Parker Rd, Parker, CO 80138

Deadline:June 15th 9 pm

CHJA #	Horse Name:	Sex	Foaling Date	Color	Age	Height	Size	Green Year
--------	-------------	-----	--------------	-------	-----	--------	------	------------

Primary Owner Name:	CHJA	DOB	Owner Email Address:	Owner Signature-I have read/agree to Federation Entry Agreement below
Owner Address	City/State/Zip	Cell Phone:	Home Phone:	Emergency Phone:

Rider #1 Name:	CHJA	#	DOB	Rider #1 Email Address:	Rider #1 Signature-I have read/agree to Federation Entry Agreement below
Rider #1 Address	City/State/Zip	Cell Phone:	Home Phone:	Emergency Phone:	
Rider #1 Classes by Number	Rider #1 Sections				

Rider #2 Name:	CHJA	#	DOB	Rider #2 Email Address:	Rider #2 Signature-I have read and agree to Federation Entry Agreement below
Rider #2 Address	City/State/Zip	Cell Phone:	Home Phone:	Emergency Phone:	
Rider #2 Classes by Number	Rider #2 Sections				

Show Fees:	Qty	Amount
Office Fee		30
EMT Fee		20
Grounds Fee		20
Stalls Call Megan 720-808-7104		30-40
Shavings		10
Late Fee		25

Release of Liability Waiver

I hereby indemnify and hold harmless Empower Equestrian and its employees, 'Cross the Meadow Farm and its employees, Windhoek Equestrian Center and its employees, and CHJA and its Board of Directors, from any liability arising from accident, injury, infectious disease, 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.

Owners Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Print Parent/Guardian Name: \_\_\_\_\_ Is Rider/ a U.S. Citizen? \_\_\_\_ Yes \_\_\_\_ No

Rider #1 Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Print Parent/Guardian Name: \_\_\_\_\_ Is Rider/ a U.S. Citizen? \_\_\_\_ Yes \_\_\_\_ No

Rider #2 Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Print Parent/Guardian Name: \_\_\_\_\_ Is Rider/ a U.S. Citizen? \_\_\_\_ Yes \_\_\_\_ No

Trainer:	CHJA#	Cell #	Email Address:
Address:	City/State/Zip	Trainer Signature	