## www.horseshowing.com or Fax to 303 773 8635

## **CROSS THE MEADOW I**

**JUNE 19 AND 20, 2021** 

or email to  $\underline{coshowentries@gmail.com}$ 

or mail to:

Carol O'Meara 8627 Gold Peak Place, Unit G, Highland Ranch, CO 80130

Entries Close Thursday June 17, 2021 7:00 pm

lorse CHJA # Horse Name:			Sex:	Foaling Date:	Co	olor	Age:	Height:	Size:	Green Year:
rimary Owner Name:  CHJA #:  CHJA # is a required field!				Owner Email Add	lress:					
ner Address:	City/State/Zip Code:				Cell Phone	Home Phone:		Emergency F	hone:	
er#1 Name:	CHJA#:	CHJA # is a required field!	DOB:	Rider #1 Email A	ddress:					
er #1 Address:	City/State/Zip Code:	<b>I</b>		Cell Phone	Home Phone:	me Phone: Emergency Phone:		hone:		
der #1 Classes by Number										
der #2 Name: C		CHJA # is a required field!	DOB:	Rider #2 Email A	ddress:					
er #2 Address:	L	City/State/Zip Code:		<b>I</b>		Cell Phone	Home Phone:		Emergency F	'hone:
der #2 Classes by Number							I			
eby indemnify and hold harmless, 'C ity arising from accident, injury, theft ng this show. Under Colorado Law, a	or damage to me, my repr n equine professional is n	resentatives or helper ot liable for injury or o	s, all equipm	ent and all anima	als under my ju	urisdiction	Call J			or
herent risks pursuant to section 13-21-119, Colorado Revised statutes.  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.							Stalls and Shavings			
Rider #1 Signature (Parent or guard	ian if minor)					Print F	970 6 Parent/Guardian Nan		122	
Rider #2 Signature (Parent or guar	dian if minor)					Print I	Parent/GuardianNar	ne:		
Trainer:				#	Cell#	Email Address:				
Address:		City/State/Zip				Trainer Signat	ture			