

# CELEBRATION OF THE HORSE

## ENTRY FORM

An Of HORSE You Can! Events Production

**ENTRY FORMS WILL NOT BE COMPLETE WITHOUT \$ 100.00 DEPOSIT**

Mail with check payable to Of Horse You Can to :Carol OMeara 8300 Fairmount Dr. G-104 Denver, CO. 80247 or

VENMO Deposit to @CRC-DPC and email to [coshowentries@gmail.com](mailto:coshowentries@gmail.com) , fax to 303 773 8635. or

Enter on-line at [horseshowing.com](http://horseshowing.com).

<b>Horse Name:</b>				Sex	Foaling Date	Color	Age	Height	Size	
<b>Primary Owner Name:</b>			DOB	<b>Owner Email Address:</b>						
<b>Owner Address</b>		<b>City/State/Zip</b>			<b>Cell Phone:</b>			<b>Emergency Phone:</b>		
<b>Rider Name:</b>				DOB	<b>Rider Email Address:</b>					
<b>Rider Address</b>		<b>City/State/Zip</b>			<b>Cell Phone:</b>			<b>Emergency Phone:</b>		
<b>Classes by Number</b>										

I hereby indemnify and hold harmless Of HORSE You Can! Inc Cottonwood Riding Club, Denver Polo Club, USHJA 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
Regular Class \$35		
Stake Class \$50		
Mini Derby \$50		
2'9" Derby \$50		
Gambler's Choice \$50		
Stall weekend \$150/ day \$90		
Bedding \$12/bag		
Golf Cart \$130/day		
EMT/ Office/ USHJA		\$37



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

<b>Trainer: or responsible party for horse and rider</b>			Cell #	<b>Email Address:</b>	
<b>Address:</b>		<b>City/State/Zip</b>		<b>Trainer Signature</b>	
<b>Taxpayer Name:</b>		<b>Address/City/State/Zip</b>			