



# Summer Haven Stables Entry Form

email to coshowentries  
@gmail.com

Horse CHJA #	Horse Name:	Sex	Foaling Date	Color	Age	Height	Size	Green Year
Primary Owner Name:		CHJA #	CHJA # is a required field!	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 #	CHJA # is a required field!	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 #	CHJA # is a required field!	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				

I hereby identify and hold harmless Summer Haven Stables, its management, the venue and its management, CHJA and its Board of Directors from any liability arising from accident, infectious disease of horse or human, injury, theft or damage, to me, my representatives or helpers, all equipment and all animals under my jurisdiction during this show.

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
Office Fee		\$30.00
EMT Fee		\$15.00
Grounds Fee		\$20.00
Stalls (Per Day)		\$50.00

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

Rider #1 Parent/Guardian Signature (Required if rider/driver/handler is a minor) \_\_\_\_\_ Print Parent/Guardian Name: \_\_\_\_\_

Rider #2 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