

NORTHWEST REINED COW HORSE ASSOCIATION
PRESENTS:
COWGIRL CLASSIC COW HORSE SHOW
AUGUST 8, 2020 * OREGON HORSE CENTER * EUGENE, OR

INCLUDE COPY OF HORSE REGISTRATION PAPERS & NRCHA/AQHA MEMBERSHIP CARDS

OWNER NAME: _____ **NRCHA #:** _____
ADDRESS: _____ **AQHA #:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
CONTACT PHONE: _____ **SS #:** _____

RIDER NAME: _____ **NRCHA #:** _____
ADDRESS: _____ **AQHA #:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
CONTACT PHONE #: _____

HORSE NAME: _____ **REG. #:** _____
CLASS(S): _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____
***Jackpot is optional for AQHA ONLY - put a "NJ" next to class # if you choose to opt out**

Entries MUST BE postmarked (or faxed) by August 5th, 2020 or a \$25 post-entry fee per horse PLUS a \$25 late cattle charge will apply!

RELEASE AND WAIVER OF LIABILITY

I acknowledge that horse back riding is a sport which carries inherent risks of injury and damage to myself, others, horses and property. I KNOWINGLY ASSUME ALL RISKS. In consideration of my participation in this event, I agree that I will defend, indemnify and hold harmless American Quarter Horse Assn., National Reined Cow Horse Assn., Northwest Reined Cow Horse Assn., and named horse show facility and any agents or employees of the above against all claims, demands and causes of action including court costs and actual attorneys fees, arising from any proceeding or lawsuit brought by or prosecuted for my benefit. This agreement is binding on my executors, heirs and assign. My signature on this entry form acknowledges that I have read this liability release and know and understand its contents.

NRCHA STATEMENT OF ELIGIBILITY

By my signature below, I hereby acknowledge that I meet the criteria for eligibility to compete in the classes entered according to the guidelines set forth in the NRCHA rulebook. This is to insure that competitors are aware of the criteria for the different classes in which they are indeed eligible to compete.

Signature of Owner or Agent

Signature of Parent/Guardian if under 18

MAIL ENTRIES/STALL RESERVATIONS TO:

Keri Croft
P.O. Box 657
Hubbard, OR 97032
FAX: (503) 272-7801
PHONE: (503) 701-3305
dkcroft4@frontier.com

TOTAL ENTRY FEES: \$ _____

\$40/\$55 NWRCHA MEMBERSHIP FEE: \$ _____

\$90.00 STALL FEE \$ _____

AQHA DRUG FEE: (\$6 per horse/judge) \$ N/A

SHAVINGS: (\$10.00 X # _____ bags) \$ _____

R.V. FEE (\$35 Per Night) \$ _____
(\$25 Per Night/Dry Camp)

TOTAL # STALLS NEEDED: _____

FENCE RUN PRACTICE (\$40 per go) \$ _____

STALL WITH: _____

\$25 POST ENTRY FEE: \$ _____

\$25 LATE CATTLE CHARGE: \$ _____

PRIZE MONEY PAID TO:
OWNER _____ or RIDER _____

\$25 HAUL-IN FEE: \$ _____

TOTAL ALL FEES: \$ _____