

T.R.O.T.S (The Riders Of The Summit)
Novice Youth Horse Show
Friday, July 24, 2009
9:00 am

Registration Form

Ages: Mini: 7 and under Junior: 8 and over

This show is open for all kids who would like some show ring experience.

Classes cost: \$7.00 day of the show.

Registration begins at 8:00 am the day of the show.

One form per participant.

If you have any question call Betsy Goodell @ 468-8568.

Classes:

1. ____ Mini Walk Trot.
2. ____ Mini Walk Trot Canter
3. ____ Junior Walk Trot
4. ____ Junior Walk Trot Canter
5. ____ Mini Keyhole
6. ____ Junior Keyhole
7. ____ Mini Barrels
8. ____ Junior Barrels
9. ____ Musical Flour Spots
10. ____ Egg and Spoon
11. ____ The Great Kool-Aid Race
12. ____ Show Offmanship (at halter perform a showmanship pattern and at the end the participant will perform a trick)

BREAK TO PREPARE FOR COSTUME CLASS! ALL AGES WELCOME!

13. ____ Costume Class (Ride or Lead Line) Time: 12:00 pm

Name _____ Age ____ (as of 1-1-07)

Mailing Address _____

Phone _____

Number of Classes _____ Total Price _____

Make checks payable to: T.R.O.T.S. Please bring the day of the show

Release must be sign to participate

CONSENT WAIVER, RELEASE FROM LIABILITY, AND INDEMNITY AGREEMENT FOR EQUINE ACTIVITIES

Date of Event: _____, 2009

Participant's Age: _____

Name of Participant: _____ (the "Participant")

If Participant in under 18 years old on the Date of the Event then Participant's Parent or Legal Guardian (the "Parent") must complete this CONSENT WAIVER, RELEASE FROM LIABILITY, AND INDEMNITY AGREEMENT FOR EQUINE ACTIVITIES

1. I, the undersigned Participant or Parent, voluntarily consent to the participation of the Participant in the Horse Shows, Horse Riding Activities and Competitive Horse Racing and/or Jumping Event held on the Date of Event written above at the **(circle one)** Summit County Fairgrounds or Breckenridge Equestrian Center, (the "Equine Activity"). _____
initial here
2. I acknowledge that the Equine Activity that Participant will be participating in is **HAZARDOUS** and involves risk of physical injury and property damage. I further acknowledge and affirm that Participant has the ability to engage safely in the Equine Activity and that Participant has the ability to safely manage the particular animal that Participant will use to participate in the Equine Activity. _____
initial here
3. In consideration of Participant's being permitted to participate in the Equine Activity: I agree to release, waive, discharge and covenant not to sue the below-defined Released Parties for injuries or damages sustained by Participant or Parent; I agree to assume all risks associated with Participant's participation in the Equine Activity; I agree to indemnify, defend and hold harmless the Summit County 4-H Program, Summit County Government, CSU Extension, The Board of Governors of the Colorado State University System, Colorado State University, the Town of Breckenridge, the State of Colorado, and the City and County of Denver, their respective subdivisions, agents, officers, directors, owners, contractors, volunteers and employees (collectively the "Released Parties") from any and all liability actions, causes of action, debts, claims and demands of every kind and nature whatsoever which may arise during the course or as a result of Participant's participation in the Equine Activity, and; I agree that Participant shall comply with all applicable rules and regulations of the Released Parties regarding participation in the Equine Activity. _____
initial here
4. Nothing in this Consent, Waiver, Release from Liability, and Indemnity Agreement for Equine Activities shall constitute a waiver or limitation on any right or immunities possessed by the Released Parties pursuant to sections 13-21-119, C.R.S., 24-10-101, et seq., C.R.S, and/or any other any other applicable legal authority. _____
initial here
5. This Release of Liability is governed by the laws of the State of Colorado and is intended to be interpreted as broadly as possible and shall be binding to the fullest extent of the law. I agree that exclusive jurisdiction and venue for any legal action arising from Participant's participation in the Equine Activity shall be in the District Court of Summit County, Colorado. If any part of this agreement is determined unenforceable, all other parts shall be given full force and effect. _____
initial here

WARNING

Under Colorado Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 13-21-119, Colorado Revised Statutes.

Youth Helmet & Age Requirement Policy

All youth are required to wear a certified equestrian helmet with safety harness fastened in place.

I HAVE CAREFULLY READ THE RELEASE OF LIABILITY, UNDERSTAND ITS CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

Signature of Participant or Parent

Date

Printed Name of Parent/Guardian