

Entry # \_\_\_\_\_

**Cowboy State's Reining Horse Association  
Sheridan Fun Day  
September 8, 2018**

Horse's Name \_\_\_\_\_ Rider's Name \_\_\_\_\_

Entry	Class Number	Class	Pattern	Entry Fee	Judges Fee	
___	1	CSRHA Open Ranch Riding	4	\$20	--	___
___	2	CSRHA Novice Ranch Riding	4	\$20	--	___
___	2A	CSRHA Youth Ranch Riding	4	\$20	--	___
___	3	CSRHA Ladies	6	\$20	--	___
___	4	CSRHA Gentlemen	6	\$20	--	___
___	5	CSRHA Open***	10	\$20	\$20	___
___	6	CSRHA Ltd. Open***	10	\$20	\$20	___
___	7	CSRHA Non Pro***	8	\$20	\$20	___
___	8	CSRHA Ltd. Non Pro***	8	\$20	\$20	___
___	9	CSRHA PT NP***	8	\$20	\$20	___
___	10	CSRHA Green Reiner L2***	8	\$20	--	___
___	11	CSRHA Novice Horse Open L1 13***	13	\$20	\$20	___
___	12	CSRHA Youth 13 & Under***	5	\$10	--	___
___	13	CSRHA Youth 14-18***	5	\$10	--	___
___	14	CSRHA Short Stirrup 10 & Under	15	\$10	--	___
___	15	CSRHA Novice Horse NP L1***	12	\$10	--	___
___	16	CSRHA Rookie L2***	4	\$20	\$20	___
___	17	CSRHA Green Horse***	3	\$20	\$20	___

Early entries suggested. \$5.00 fee for post entry. Mail by September 1, 2018 or email by September 5, 2018 to:  
Stephanie Williams  
20 Mountain Dr  
Cody, WY 82414  
swilliams@park6.org

Subtotal for classes	\$ _____
Office Fee per horse	\$ 5.00 _____
Stalls (Fairgrounds)	
#of Nights _____ @ \$25.00	\$ _____
Electrical Hook up	
# of Nights _____ @ \$25.00	\$ _____
Shavings #bags _____ @ \$8.00	\$ _____
Post Entry \$5.00/horse	\$ _____
<b>Total Due</b>	<b>\$ _____</b>

**Release of Liability**

I agree to be responsible for any damages caused by my entry in this show and that as a condition of my entry I waive any claim for damages against Cowboy States Reining Association and/or directors, employees, volunteers. I also waive any claim against the Sheridan College and/or its employees for injury or death to persons or animals or for loss, damage or destruction of property.

**Signature of Participant** \_\_\_\_\_ Date: September 8, 2018

**Parental Consent:**

I hereby consent to the entry of my child \_\_\_\_\_ in this show. I certify that I have read and accepted the Responsibility Clause of this form.

**Signature of Parent or Guardian** \_\_\_\_\_

\*\* Pay for largest single judges fee in each class group entered.

\*\*\* Anyone may enter, but must be a current CSRHA member to qualify for year-end awards. Prizes for places 1, 2 and 3 will be awarded at the show or all CSRHA classes.

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