

KANSAS SUMMER CLASSIC

Number _____

Horse's Name _____

Breed _____ Age _____ Coggins No. _____

Rider's Name _____ Rider's Age _____

Owner's Name _____

Address _____

City _____ State _____ Zip _____

Owner's Telephone Number _____ Email address _____

Circle the class Number(s):

1	2	3	4	5	6	7				
8	9	10	11	12	13	14	15	16	17	18
19	20	21	22	23	24	25	26	27	28	29
30a	30	31	32	33	34	35	36	37	38	39
40	41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56					

Total Number of classes @ \$6.00 each _____

Total Number of Jackpot classes @ \$15.00 each _____

Total fees \$ _____

Check No. _____ Cash _____ Paid _____ Tab _____

_____ (please print name) hereby agree that Due West Ranch Inc., d/b/a Due West Inc., Bill Basler, Due West TRC, Mary Sharp and their owners, agents and employees shall not be responsible or liable to me for any injury, loss or damage resulting from my participation in any activity sponsored by, or on the property of Due West Ranch, Inc.; Bill Basler, Mary Sharp, Due West TRC. Such activities include but are not limited to boarding, showing, riding lessons, and any horse related activity. I further understand horseback riding and showing carries risk and I assume those risks by participating in horse related activities.

I hereby release and waive any claims I have against Due West Ranch, Inc. their owners, agents and employees and I agree to indemnify and hold harmless both said parties against any and all-claims for Injury, loss or damage I may suffer.

Signature of participant _____ Signature of parent/guardian (if participant is a minor), _____

Address _____ Date _____