



Colorado State University

American Stock Horse Association Clinic and Competition
Friday October 10, Saturday October 11, and Saturday October 12 2014
CSU Equine Center, Fort Collins, CO



Judge and Clinician: Karen McCuiston

Show Contact: John Snyder

Show Secretary: Robin Miller

PLEASE COMPLETE ONE ENTRY FORM FOR EACH RIDER/HORSE COMBINATION

All exhibitors must be a current member of the American Stock Horse Association to compete. All horses must have an ASHA competition license to compete. A copy of both membership and competition license **MUST** be included with entry forms.

Entries Due: Friday October 3, 2014 – Late entries accepted up **until 7:00am** the day of the show with a \$20 late fee and no guarantee of fresh cattle.

All horses must have a current health certificate within the last 48 hours along with a negative Coggins test

EXHIBITOR INFORMATION:

Name: _____ Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ E-mail: _____
 Owner's Name: _____ Birth date for Youth: _____ Exhibitor ASHA
 Member #: _____ Owner Member #: _____
 CoWN Member #: _____ Email Contact: _____

HORSE INFORMATION:

Name: _____ Gender: ___S___G___M___ ASHA Comp License#

Coggins Accession #: _____ **Date:** _____ **Lab:** _____

Release: Under Colorado Law, an equine professional is not liable for injury to or death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Section 13-21, Colorado Revised Statutes. I/We hereby request to enter the event indicated and agree to abide by the bylaws, standing rules, judging and rules of the respective organizations involved with this event. I/We hereby release ASHA, CSU and other involved organizations, its members and employees, and anyone associated with this event including the clinician(s) from any loss to myself, employees, agents, horses, vehicles, and/or equipment while attending and/or participating in this event. The provisions contained herein are hereby made a part of this entry agreement.

Adult Signature: _____ Date: _____

Emergency Contact Name: _____ Phone: _____

Exhibitor Allergies: _____ Exhibitor Meds: _____

I hereby give my permission to have an EMT/Paramedic and/or Doctor of Medicine or Dentistry provide medical assistance and/or treatment and agree to be responsible financially for the cost of each assistance and/or treatment.

Adult Signature: _____ Date: _____

Classes	Open	Non-Pro	Ltd Non-Pro	Green Horse	Novice	Collegiate	Youth
All 4 Classes	\$115	\$100	\$100	\$100	\$95	\$85	\$65
Pleasure	\$25	\$20	\$20	\$20	\$20	\$15	\$10
Trail	\$25	\$20	\$20	\$20	\$20	\$15	\$10
Reining	\$25	\$20	\$20	\$20	\$20	\$15	\$10
Working Cow	\$50	\$50	\$50	\$50	\$45	\$45	\$45
Clinic	\$45	\$45	\$45	\$45	\$45	\$45	\$45

Non-Pro Ltd Non-Pro Novice Collegiate (circle appropriate class)

Collegiate are only eligible for collegiate prizes unless they pay the entry for another division

Clinic will begin on Friday starting at Noon

Open, Non-Pro, and Ltd Non-Pro will show on Saturday starting at 8.00am

Collegiate will show on the day
your division is showing.

Green Horse, Novice, and Youth will show on Sunday starting at 8:00am

There are no RV or Camper Hookups

Total Class Fees: \$ _____
 Clinic Fee \$45 \$ _____
 Office Charge \$15/entry: \$ 15.00 _____
 ASHA Membership (\$25) Collegiate (\$15): \$ _____
 ASHA Horse Competition License (\$15): \$ _____
 CoWN Membership (\$25) \$ _____
 Stalls \$20/night/horse (shavings not included) 30 stalls available first come first serve: \$ _____
 Late Fee (\$20): \$ _____
Total: \$ _____

Make checks payable to **CSU Equestrian Team** and mail entries to:

Robin Miller

31257 County Road 74

Galeton, CO. 80622

Phone: (970) 396-4440 Email: Millerag.robin@aol.com

Questions: John Snyder

Phone: (806) 422-0495

Email: John.Snyder@colostate.edu