

ALAMO AREA YOUTH HORSE ASSOCIATION



Name_____

Phone_____

Address_____

Coggings Accession#_____ Date_____ Lab_____

Run #	Horse's Registered Name	Division			Total
_____	_____	<input type="checkbox"/> \$35 Open	<input type="checkbox"/> \$25 Youth	<input type="checkbox"/> \$25Senior	\$_____
_____	_____	<input type="checkbox"/> \$35 Open	<input type="checkbox"/> \$25 Youth	<input type="checkbox"/> \$25 Senior	\$_____
_____	_____	<input type="checkbox"/> \$35 Open	<input type="checkbox"/> \$25 Youth	<input type="checkbox"/> \$25 Senior	\$_____
_____	_____	<input type="checkbox"/> \$35 Open	<input type="checkbox"/> \$25 Youth	<input type="checkbox"/> \$25 Senior	\$_____
_____	_____	<input type="checkbox"/> \$35 Open	<input type="checkbox"/> \$25Youth	<input type="checkbox"/> \$25 Senior	\$_____

Exhibitions \$5 each _____ # of Exhibitions x \$5 = \$_____

_____ 10 -10:30 _____ 10:30 -11 _____ 11- 11:30 _____ 11:30 -12 Office Fee = \$ 5

_____ 12-12:30 _____ 11:30 -12 _____ 12 - 12:30 _____ 12:30 -1 Grand Total \$_____

In submitting my entry, I hereby release the show organizer, and any official, employee, director, or agent of same, from any claim or right for damages, which may occur to me or my horse at this show or in transit. AAYHA has the right to refuse entry to anyone at anytime.

Signature (must be signed by parent or guardian for minors) Date

Under Texas law (Chapter 87, Civil Practive & Remedies Code), 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