



July 11 & 12, 2020 at Carol Rose Quarter Horses, Gainesville, TX

	Reservation Form	
Name:	Age: _	Guel ROSE
Address:		THE OF CHAMPIONS
City:	State:	Zip:
City: Out of State Horse?	If yes, Please send/L	oring your horse health
documents!		
Guardian/Parent Name:		
Best Contact Phone Num	ıber:	
Stall Needed?:	Hauling in?:	_
How many years have yo	ou been riding horses?:	
Have you ever competed NHSRA):		NRCHA, SHOT,
Have you had prior expe	rience working cattle or	horseback?
Have you attended a Rei	ned Cow Horse Clinic Be	fore?
If yes, when/where?		
Do you plan to compete	in Reined Cow Horse ev	ents in the future?
The Clinic is limited to the	he first 60 narticinants to	o sian un. This fills un fast l

# In order to participate you MUST:

Complete and return this clinic reservation form to Gay Lenz at <a href="mailto:glenz@lenzenterprises.com">glenz@lenzenterprises.com</a> or fax # 405-730-8050 by Friday, June 26th

# FREE Youth Reined Cow Horse Clinic







**July 11 & 12, 2020** at Carol Rose Quarter Horses 4500 N I-35, Gainesville, Texas 76240 (Exit #501)

Top <b>NRCHA</b> Profession	als are ready	to share their knowledge	
of the exciting sport of	<b>Reined Cow</b>	Horse with the youth (18 & unde	r)
<u>Clinicians</u> : Sam Rose, _	TBD	,TBD,,	



Reservation forms must be received by June 26, 2020 <u>-limited to first 60</u> participants

For more information & forms go to:
http://srcha.org/event/free-youth-clinic/
Complete and return your clinic
reservation form to Gay Lenz at
glenz@lenzenterprises.com
If you have any questions, call Gay at

Saturday, July 11 at 9:00 am — An introduction of our clinicians and a short video and explanation of the sport of reined cow horse. The attendees will then be assigned to groups and will rotate through each station. Each station will cover different aspects of the reined work and cow work. \*\*\*\* Lunch will be provided and sponsored by \_\_\_\_\_\_ \*\*\*\*

Sunday, July 12 at 9:00 am — We will hold a reined cow horse show. This experience allows the youth to experience a show pen environment. One Clinician will be judging the class, while the other clinicians will be able to coach before the run and from the rail, then discuss their run in detail.

\*\*\* Prizes will be awarded to the most improved and top riders\*\*\*

405-818-7556



## **Waiver and Release of Liability:**

Registrant acknowledges that riding and showing reined cow horses are inherently dangerous activities that expose the participant to a substantial risk of serious property damage, personal injury, or death. In consideration for the right to participate in such activities, or any other activity that the registrant may participate in at the NRCHyA clinic, registrant assumes the risk of injury or death of participating in those activities and hereby releases National Reined Cow Horse Association ("NRCHA") and its employees, representatives, and all other agents associated with NRCHA from liability for any personal injury, property damage, or death that occurs from those activities. Registrant further agrees to release and hold harmless NRCHA, its employees, representatives, agents, and anyone else working at the event who through negligence or carelessness otherwise might be liable in damages to registrant. This release and waiver of liability shall binding on Registrants heirs, representatives, dependents, and successors in interest. I agree as a condition of in consideration of acceptance of entry the National Reined Cow Horse Association may use or assign photographs, videos, audios, cablecasts or other likeness of me and my horse taken during the course of the clinic for the promotion, coverage or benefit of the competition, sport or the NRCHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way to jeopardize Non Pro/Amateur/Youth status. I hereby expressly and irrecoverably waive and release rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity or misappropriation. I have the authority and hereby do, by making this entry, assume responsibility for and bind owner, rider/or agent to the terms and conditions of this Release and Waiver of Liability. I warrant that I am the parent or legal guardian of the participant named below, and that I have read and fully understand the foregoing terms.

Youth Name Printed:	
Youth Signature:	
Parent/Guardian Name Printed:	
Parent/Guardian Signature:	
Address:	

SRCHyA Youth Clinic, July 11 & 12, 2020 Gainesville, Texas

Based on the information below, please mark rating based on your experience from 1-6 please. This is just to help us to get you in a group as close to your level as possible.

Place group # in box:	
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# **Group 1:**

Beginner Rider

#### Group 2:

Horse has never worked cattle/green rider

# **Group 3:**

Horse has worked cattle/rider has not, but rides well

# **Group 4:**

Boxing and shown (Do not want to go down the fence)

# **Group 5:**

Have worked cows and wants to go down the fence (has not been down the fence yet)

## **Group 6:**

Has been down the fence and has shown down the fence