



Free Youth

Reined Cow Horse Clinic

June 20 & 21, 2026

JL Arena – 10801 E Hwy 82, Whitesboro TX

Join Top NRCHA Professionals who are excited to share their knowledge of the exciting sport of Reined Cow Horse with the youth. This clinic is FREE for those 18 and under.

This application must be completed, signed and returned to Jackie Cline by June 1st, 2026

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 or volunteering 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: _____ Phone: _____

Parent/Guardian Signature: _____

Address: _____

NAME _____ Age _____

Based on the information below, please mark your group 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, you are welcome to add notes indicating ability.

Mark your closest group number and add any relevant notes below

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:

Has worked cows but has not been down the fence
(Wants to learn to go down the fence)

Group 6:

Has shown down the fence

2026 Youth Reined Cow Horse Clinic Reservation Form

JL Arena 10801 E Highway 82, Whitesboro, TX June 20-21, 2026

Name : _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____ Phone Number: _____

Email: _____

Emergency Contact: _____

Stall Needed?: _____ Hauling in?: _____

You must have current coggins and health certificates on all horses.

How many years have you been riding horses?: _____

Have you ever competed in Reined Cow Horse events? (NRCHA, SHOT, NHSRA): _____

Have you had prior experience working cattle on horseback? _____

Have you attended a Reined Cow Horse Clinic Before? _____

If yes, when/where? _____

Do you plan to compete in Reined Cow Horse events? _____

T Shirt Size? _____

Would you like to be contacted about sponsoring this clinic? (Lunch, Arena, T-Shirts, Prizes, Equipment or general.) _____

The Clinic is limited to the first 60 participants to sign up.

In order to participate you MUST complete and return ALL THREE PAGES of this clinic reservation form WITH SIGNATURES to

Jackie Cline at jcline7@gmail.com or fax # 405-730-8050 by June 1st