



# COBRA Circuit Event Entry Form 2009

DATE OF CIRCUIT EVENT: \_\_\_\_\_ LOCATION OF EVENT \_\_\_\_\_

NAME: \_\_\_\_\_ RIDER CLASSIFICATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

Please complete one section for each League entered. If riding more than one horse, you will need to complete one section for each horse. Complete one Event Entry Form per rider. Forms should be postmarked no later than 10 days prior to entering the Circuit Event. Check appropriate boxes to indicate entry.

**Send Entry To: COBRA Treasurer, 117 CR 4894, Boyd, TX 76023**

LEAGUE: _____	INCENTIVE 4D: _____
HORSE(reg. name): _____	CLASSIFICATION: _____

LEAGUE: _____	INCENTIVE 4D: _____
HORSE(reg. name): _____ (use extra forms if entering more than two horses)	CLASSIFICATION: _____

League Entries: \_\_\_\_\_ x \$ 45 = \_\_\_\_\_  
 Incentive 4D: \_\_\_\_\_ x \$ 20 = \_\_\_\_\_  
 Exhibitions: \_\_\_\_\_ x \$ 5 = \_\_\_\_\_  
 Membership: \_\_\_\_\_ x \$100 = \_\_\_\_\_  
 Non-member Fee: \_\_\_\_\_ x \$ 25 = \_\_\_\_\_  
 Pro-rated Membership: \_\_\_\_\_ x \$ 35 = \_\_\_\_\_  
 Additional Horses Classified: \_\_\_\_\_ x \$ 30 = \_\_\_\_\_  
 Late or Processing Fee (\$15, \$20): \_\_\_\_\_ x \$ \_\_\_ = \_\_\_\_\_

\*See Rule Book or website for fees and Membership distinctions.

Enclose a **\$45** check or money order for total Event entry (if postmarked 10 days prior to the event). A **\$15 late fee** will be assessed if entry is received after the 10-day postmark and/or on the day of the Circuit Event.

**TOTAL AMOUNT ENCLOSED:** \$ \_\_\_\_\_  
 (Remember to come 2 hours prior to race if not classified.)

**2009 Circuit Event Schedule**  
**Salt Creek Arena, Boyd Texas**  
2<sup>nd</sup> Circuit Series  
 May 31<sup>st</sup> – Ex. 11am, Race 3pm  
 June 6<sup>th</sup> – Ex. 9am, Race 1pm  
 July 5<sup>th</sup> – Ex. 11am, Race 3pm  
3<sup>rd</sup> Circuit Series  
 July 19<sup>th</sup> – Ex. 11am, Race 3pm  
 August 16<sup>th</sup> – Ex. 11am, Race 3pm  
 August 29<sup>th</sup> – Ex. 9am, Race 1pm  
4<sup>th</sup> Circuit Series  
 September 19<sup>th</sup> – Ex. 9am, Race 1pm  
 September 26<sup>th</sup> – Ex. 9am, Race 1pm  
 October 3<sup>rd</sup> – Ex. 9am, Race 1pm  
Last Chance Race  
 October 4<sup>th</sup> – Ex. 11am, Race 3pm  
 Only for Full Members that are missing one race to compete for year-end awards!  
 (must have 9 races)

INDEMNIFICATION AND RELEASE OF PERSONAL INJURY – By signing this document and by making entry as a participant, I hereby understand that injury/death to myself, my horse or my child is a possibility no matter how careful the sponsors, officers, directors or participants may be. Furthermore, I, as participant (or parent/guardian), agree to hold harmless COBRA, the host facility and its officers, agents, management, contractors and employees from any expense, cause of action, damage or claim of damage (including legal fees) or any kind whatsoever which I might assert as a result of my (or my child's) injury, death or claim.

I also understand that all horses will be photographed and videoed, and is the sole property of COBRA.

AGE CERTIFICATION – By the appearance of my signature below, I certify that I am 18 years old or older OR that I am the parent or legal guardian of the participant/entrant who is under the age of 18.

I further certify that I have available at the request of event management, a current Coggins test on each animal I have on the event grounds. I understand that if State and Local Authorities require presentation of said test chart at this event and I cannot present a Coggins test per any horse, I will be responsible for any fines personally, and will be responsible for reimbursement of any fines to the event producer.

**Contestant Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent or Guardian:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(If Contestant is under 18 years old)

