



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 = _____

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

Enclose a check or money order for total Event Entry plus Incentive and any membership dues. There will be NO LATE FEES.

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

2009 Circuit Event Schedule
Salt Creek Arena, Boyd Texas
2nd Circuit Series
 May 31st – Ex. 11am, Race 3pm
 June 6th – Ex. 9am, Race 1pm
 July 5th – Ex. 11am, Race 3pm
3rd Circuit Series
 July 19th – Ex. 11am, Race 3pm
 August 16th – Ex. 11am, Race 3pm
 August 29th – Ex. 9am, Race 1pm
4th Circuit Series
 September 19th – Ex. 9am, Race 1pm
 September 26th – Ex. 9am, Race 1pm
 October 3rd – Ex. 9am, Race 1pm
Last Chance Race
 October 4th – 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)

