



ENTRY FORM

Name: _____ Age: _____

Address _____

City _____ State _____ Zip _____

Phone: _____ Instructor: _____

Class #	Horse Choice			Fee	Horse Cg
	1)	2)	3)		
	1)	2)	3)		
	1)	2)	3)		
	1)	2)	3)		
	1)	2)	3)		
	1)	2)	3)		
			<u>TOTAL</u>	\$	\$

ENTRY FEES MUST ACCOMPANY THIS FORM



WARNING

Under Kansas law, there is no liability for an injury to or death of a participant in domestic animal activities resulting from the inherent risk of domestic animal activities, pursuant to Section 1 through 4. You are assuming the risk of participating in this domestic animal activity.

I, hereby release WICHITA RIDING ACADEMY, INC., its executives, owner, and employees from any and all liability for injury that may be received while preparing to ride, mounting, riding, show handling, dismounting, or returning the horse; and , any other activities not enumerated, but which may pertain to my "riding" a horse. This release is total and without reservations on my part.

By signing this form, I acknowledge that I have read and understand the form.

Date: _____ Signature _____
Parent or Legal Guardian, if under 18 years of age

A signed release form must be on file or attached