



Presents:



Cowboy Dressage
Clinic with
Martina Bone
Somerset, CA

October 21-22, 2017
Linn County Fair-
grounds
Albany, Oregon

Come and learn from one of the most sought after Cowboy Dressage World Professional Associations clinician and judge. For more information about Martina visit her website at www.posemucklfarm.com

Limit of 12 Riders @ \$425 Includes Fri-Sun Stall

Auditors \$25 Per Day

One Free Day Audit with ORCWDA Membership

RV Reservations must be made through www.lcfairexpo.com

For more information please contact Christine Simpson 360-989-6307



Martina Bone Clinic Entry
October 21-22, 2017
Linn County Fairgrounds
Albany, Oregon

_____ Riding Participant \$425 Limit 12 (Includes Fri-Sun Stall)

_____ Audit For Sat and Sun \$50

_____ Audit For Sat Only \$25

_____ Audit For Sun Only \$25

_____ ORCWDA Membership \$25 (Includes One day Audit) _____ Sat or _____ Sun

_____ Current ORCWDA Member Audit (Membership # _____)
One day Audit No Charge _____ Sat or _____ Sun

Rider _____ Age _____

Horse _____ Age _____

Phone _____

Address _____

E-mail _____

Emergency Contact _____ Phone _____

Signature _____

Parent or Guardian Signature _____

Please make check payable to ORCWDA.
Mail to ORCWDA, P.O. Box 1243, Molalla, OR 97038
Full payment & release form must be included with entry.
For more info contact Christine Simpson 360-989-6307

ORCWDA RELEASE, ASSUMPTION OF RISK, WAIVER & INDEMNIFICATION

I represent by signing this form that I am participating in this event voluntarily. I understand and acknowledge that horses can be unpredictable and sometimes dangerous animals, and that horse related activities involve inherent risks of accident, loss and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("Harm"). I participate at my own risk. I agree to release OR Cowboy/Western Dressage Alliance ("ORCWDA") from all claims for money damages or otherwise from any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the ORCWDA, Facility, Event Company, Event Coordinator, or Owners. I agree to expressly assume all risks of Harm to me or my horse, including the Harm resulting from the ORCWDA, Facility, Event Company, Event Coordinator, or Owners. I agree to indemnify (that is, to pay for) any losses, damages, or costs incurred by me or my horse, my family members or attendants at the event.

I understand that I am not required to wear protective head gear and I acknowledge that ORCWDA has notified me to do so, while warning that no protective gear can guard against all injuries. Those under the age of 18 will be required to wear a helmet.

If I am a parent or guardian signing on behalf of a minor, I consent to the minor's participation and agree to all of the above provisions, and agree to assume all the obligations of this Release on behalf of the minor.

I understand that ORCWDA as stated above includes all of their officers, officials, directors, agents, personnel, volunteers and affiliated organizations. I represent that my horse and I are both healthy and sound enough to participate in the event.

I also agree that ORCWDA, Facility, Event Company, Event Coordinator, or Owners may use or assign photographs, videos, audios, cablecasts or other likenesses of me and my horse taken during the course of the event for the promotion, coverage or benefit of the ORCWDA, Facility, Event Company, Event Coordinator, or Owners. Those likenesses will not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status in competition. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claims to compensation, invasion of privacy, right of publicity, or to misappropriation.

ORS 30.687-697 Oregon Equine Activity Liability Act

This act stipulates that an equine sponsor or an equine professional is immune from liability for the death or injury of a participant, arising out of riding, training, driving, grooming or riding as a passenger upon an equine. However, there are exceptions to this rule: an equine sponsor or professional will be held liable for injuries of an equine activity participant if he or she displays a willful and wanton or intentional disregard for the safety of the participant.

By signing below, I agree to be bound by all applicable statutes of the state of Oregon and ORCWDA and Owners' rules and all terms and provisions of this entry form.

Participant Signature _____

Print Name _____

Parent/Guardian Signature _____

Print Name _____

On behalf of (minor's name) _____

Date _____

MEMBERSHIP APPLICATION/EMAIL LIST APPLICATION

Yearly membership is January 1st to December 31st

Date: _____

Check all that apply:

New member application (\$25)
Membership renewal (\$25)
Please add me to your email list for updates

Want to volunteer? Yes No (check all below that apply):

Want to help at events _____
Have a venue available for events _____
Know a clinician who can do demo/clinic _____

Other (please specify): _____

PLEASE PRINT

First and last name: _____

Street/mailling address: _____

City/State/Zip: _____

Phone: _____

Email address: _____

Cash—amount paid: _____

Check—amount paid: _____

Please make checks payable to **ORCWDA**.
You will receive confirmation of payment via email. Thanks for your support!

Oregon Cowboy/Western Dressage Alliance
PO Box 1243, Molalla, OR 97038

**THANK YOU! WE LOOK FORWARD
TO RIDING WITH YOU SOON!**