

Northern Ohio Outlaws - Entry Form

CMSA #	Class:	Date of Birth:
Name:		Horses name:
Address:		Breed: Age:
City:		Sex:
State:	Zip:	
Telephone:		

SATURDAY

SUNDAY

Adult/Juniors/Seniors:	\$55	Adult/Juniors/Seniors:	\$55 x _____
Wrangler (Open)	\$25	Wrangler (Open)	\$25 x _____
Wrangler (Limited)	\$15	Wrangler (Limited)	\$15 x _____
Jackpot #1	\$10	Jackpot #1	\$10 x _____
Jackpot #2	\$10	Jackpot #2	\$10 x _____
Rifle	\$20		\$20 _____
			Total _____

Make check payable to Northern Ohio Outlaws

Mail to: Dottye Ferguson, 12640 Waters Lane, New Concord, Ohio 43762

(740) 796-2583 dferguson23@aol.com

SUNDAY

STAGE 1			
STAGE 2			
STAGE 3			
STAGE 4			

LIABILITY RELEASE FORM AND SOLIDARITY AGREEMENT

I understand that I am participating in a sport which contains dangers , and risks may arise including, but not limited to, accidental injury, the forces of nature, and illness. I consideration of the right to participate in these events and the services provided for me by CMSA and its agents, I have and do hereby assume the risks associated with such events. The contestant shall, at his own expense, defend management and/or all sponsors, their members, or employees from any and all such claims and indemnify from any and all liability, damage, and costs arising from injuries to person or property occasioned by any act of omission of the contestant.

Signature: _____ Date: _____