

NATIONAL VERSATILITY RANCH HORSE ASSOCIATION

5925 Omaha Blvd., Colorado Springs, Colorado 80915
Phone 719-550-0189 ~ Fax: 719-550-0194 ~ www.NVRHA.org



Event Registration

Participant Name: _____
 Email: _____
 Address: _____
 City/State: _____ Zip: _____
 Home Phone: _____
 Cell Phone: _____
 NVRHA No.: _____
 Are you a current member? ___ Yes ___ No

Registered Name of Horse: _____
NVRHA Horse ID#: _____
DECLARATION OF AMATEUR STATUS: I am the owner or authorized rider of this horse and hereby certify that I have not shown, judged, trained or assisted in training or instructed another person for remuneration in riding or training a horse for a period of two (2) years. (An Amateur may accept prizes, paybacks, or purses for events and maintain Amateur status.)
 Signed: _____

Permanent assigned Division (check): Youth: Novice: _____, Advanced: _____;
Amateur: Novice: _____, Limited: _____, Advanced: _____; **Open:** _____; **Don't know:** _____
 For **Rider Classifications** by Division refer to the Rules & Regulations on our web site: NVRHA.org



PLEASE INDICATE WHAT EVENT YOU'RE ATTENDING AND COMPLETE **ONE FORM PER HORSE/RIDER TEAM:**

Event Name: _____ Location: _____ Date(s): _____
 Registration Fee: \$ _____ = \$ _____
 Stall Fee: \$ _____ x _____ nights = \$ _____
 Social Event: \$ _____/person x _____ people = \$ _____
 Other (specify): \$ _____ x _____ = \$ _____
 NVRHA Membership Fee: (see web for prices: www.nvrha.org) \$ _____
 (Second time participants are required to become a member)
Please include a completed membership form also, if applicable **TOTAL: \$** _____

Cancellation Policy: 15 days or more 100% refund; 14 days or less; decision by event manager to transfer fee to another event or partial refund determined by expenses; full refund if rider gets a paid replacement. NVRHA reserves the right to cancel an event within 48 hours prior to the event.

Payment: Make checks payable and mail to: NVRHA, 5925 Omaha Blvd., Colorado Springs, Colorado 80915
 Phone 719-550-0189 or Fax: 719-550-0194. **To pay by credit card - Mastercard or Visa ONLY:**

Name on Credit Card: _____ Type: _____
 Acct #: _____ Expiration date: _____
 Signature: _____ Date: _____

Release: By signing below, I/we are waiving our right, if any, to claim against, maintain an action against, or recover from any equine activity sponsors, equine professionals, or any other person for injury, loss, damage, or death resulting from any of the inherent risks of this equine activity. I/We hereby request to enter the event indicated and agree to abide by the bylaws, standing rules, judging, and rules of the respective organizations involved with this event. I/We hereby release, NVRHA, and other involved organizations and its members and employees from any loss to myself, employees, agents, horses and/or equipment while attending and/or participating in this event. The provisions contained herein are hereby made a part of this entry agreement. In addition, the general understanding of any "publication, video, and internet consent and release agreement" is incorporated in this release including: no monetary considerations; photo, video or verbal statements may be used now and in subsequent years as the program deems fit; is binding upon heirs and/or future legal representatives.

Signature – Participant, Parent/Guardian (under 18 years old)

Date