

Date: July 14, 2018 Limited to first 100 horses **Place:** Crooked Creek Horse Park, Ford City, PA **Sponsored by: The Guthrie Agency** 217 First St. Apollo, PA (724)478-4381 - Please call for your insurance needs. Rodeo questions use number listed below.

Cost: \$40.00 per horse on the grounds Arrival Time: AFTER 9am on Friday July 13th Check-out Time: BEFORE 1pm on Sunday July 15th

Make checks payable to: FAHA Championship Rodeo

Mail registration to: Karen Clark

404 Eagle Lane

Apollo, PA 15613

Phone: 724-568-4448 Evenings for questions **Email:** trailride@fortarmstrongrodeo.com

Includes:

- * 1 wristband for admission to Friday & Sat. rodeo.
- * Stall for 1 horse Fri. & Sat. bedding not provided.
- * Participation in organized trail ride on Sat 9:30 Ride will be approx 3 ½ hrs/Bag lunch incl.
- * Primitive Campsite electric is additional fees will apply to sites setup in front of hookups.
- * Sites will be limited to 20 ft width.
- * www. fortarmstrongrodeo.com

Cost	Quantity	Total	Due
\$ 40.00			
30.00			
15.00			
45.00			
5.00			
15.00			
26.00			
8.00			
	\$ 40.00 30.00 15.00 45.00 5.00 15.00 26.00	\$ 40.00 30.00 15.00 45.00 5.00 15.00 26.00	\$ 40.00 30.00 15.00 45.00 5.00 15.00 26.00

Children under 4yr are free	Total Due
Name_	Phone#
Address	
Email	
Eman	All riders will be required to sign a waiver.

Hold Harmless Agreement / Participant Release Waiver

On behalf of: Fort Armstrong Horseman's Association / Foundation Operator of Crooked Creek Horse Park, Manor Recreation Area, Ford City, PA

Event: Fort Armstrong Championship Rodeo Trail Ride

Date: July 13, 2018 through July 14, 2018

PLEASE READ CAREFULLY BEFORE SIGNING!!!

EVENT SPONSORS AND CLUB ADMINISTRATORS DO NOT ASSURE YOUR SAFETY

I acknowledge that I, Participant, Parent or Legal Guardian, participate in this event totally at my own risk for injuries or property damage I or my family may incur and I acknowledge that I, Participant, Parent or Legal Guardian, et.al. Hereby release and hold harmless the sponsor, co-sponsors, their owners, their officers, directors, members, affiliated organizations and others acting on its behalf, from any claim, legal liability, legal action, or right of damages, for any accident which may occur to me or my equine animal.

I, the undersigned Participant, Parent or Legal Guardian, being of legal age, have read and understand the above agreement and release.

Name of Participant (Please Print)	Signature of Participant	Date
Name of Parent/Guardian (Please Print)	Signature of Parent/Guardian	Date
Address:		
Phone Number:		

^{*} Please complete a separate form for each participant