

# 2010 NCHA Youth Scholarship Cutting



## 2010 NYCHA Convention and Scholarship Cutting



**Will Rogers Center • Fort Worth, Texas  
\$28,000 in Scholarships will be Awarded**

### Entry Deadline - June 15, 2010

Schedule coming soon

Check here if horse is owned by a member of the immediate family

RIDER & NCHA #	DIVISION		HORSE & REG NO.	OWNER & NCHA #
	JUNIOR YOUTH	SENIOR YOUTH		
_____	_____	_____	_____	_____
# _____			# _____	# _____

**All owners and riders must be current NCHA members.**

AS A CONDITION TO ENTER IN THIS CONTEST I AGREE TO SUBMIT TO A POLYGRAPH EXAMINATION REGARDING COMPLIANCE WITH OR VIOLATION OF NCHA RULES GOVERNING NON-PROFESSIONAL HORSE OWNERSHIP, IF REQUESTED BY THE EXECUTIVE DIRECTOR AS PART OF AN INVESTIGATION CONDUCTED PURSUANT TO THE RULES.  
If contestant is under 21 years of age both contestant and parent or legal guardian must sign this form.

**RELEASE FROM LIABILITY AND WAIVER OF RESPONSIBILITY**

As a condition to participate in this event, the NCHA, its directors, officers, employees, members, agents and representatives ARE HEREBY RELEASED from all claims, demands, or causes of action of any kind or nature whatsoever; whether now existing or to hereafter accrue, on account of any damage, cost or expense (i) AS A RESULT OF ANY BODILY INJURY, LOSS OR DAMAGE TO ANY ANIMALS, EQUIPMENT OR OTHER PERSONAL PROPERTY, FROM ANY CAUSE WHATSOEVER INCLUDING, BUT NOT LIMITED TO, THE SOLE OR CONCURRENT NEGLIGENCE OF NCHA,

ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS OR REPRESENTATIVES; or (ii) as a result of the interpretation or enforcement of the NCHA Constitution, ByLaws, Rules or Regulations and the risk of any such damage, cost or expense which may occur by reason of foregoing is hereby assumed and accepted. This waiver is binding on the undersigned as well as all riders, grooms and other helpers associated with the participation of the horse(s) described herein in this event and the undersigned indemnifies the NCHA from all claims, demands, or causes of action based on any of the foregoing.

Youth Phone \_\_\_\_\_ Youth Birthday \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Youth Signature \_\_\_\_\_

Signature of parent or legal guardian \_\_\_\_\_

**ENTRIES NOT ACCEPTED WITHOUT PARENT OR LEGAL GUARDIAN SIGNATURE**

**Entry Fee \$75 \_\_\_\_\_ Stall Fee \$75 \_\_\_\_\_ (youth only)**

MasterCard  Visa Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

**SEND TO: 260 BAILEY AVE. • FORT WORTH, TEXAS 76107-1862 • (817) 244-6188 • fax (817) 244-2015**