

Event: Kit Carson Riding Club

Sept 19 th	Divi	sion		
(For a list of di	visions please s	see <u>www.obstaclechallen</u>	geseries.com or FB page)
Rider Name				
Address			City	
State	Zip	Telephone	Email	
Emergency Contact			Phone	
Parent or Le	gal Guardian	Name If under 18:		
Signature of	Rider or Lega	l Guardian		

HORSE INFORMATION

Horse's Na	me:	E	Breed	Age	Mule?		
Sex	Color	_ If you wish t	to participate wi	ith more tha	n one horse, you must		
complete separate form and pay an entry for each horse.							
Do you wa	nt to ride toward	ds the:	_Beginning	Middle	_End of your Division?		

Special Instructions: Pre register by Sept 10th and receive \$5.00 off the

regular Division fees of \$28.00

Contact Rosie Mitchell luv2lope @icloud.com 719-339-2942

Jackpot Race at end of all divisions, 100% payout 1st thru 3rd (50-30-20). Cost is additional \$20.

Make checks payable and mail to:Kit Carson Riding ClubAddressMail to: Rosie Mitchell, 6315 Yoder Rd, Calhan, Co 80808

~Please familiarize yourself with the 2021 rules online prior to day of race ~ www.coloradoobstaclechallenge series.com

Host Use Only Date Received	Check #	Amount
\$ Entry #		

