



## Cowboy State Stock Horse Association Membership Form For the year of 2023

Please fill out the requested information below, make checks payable to CSSHA and return along with your payment to:

CSSHA, P.O. Box 1981  
Riverton, WY 82501

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail Address for news/updates: \_\_\_\_\_

☐ Family Membership \$25      ☐ Single Membership \$20      ☐ The Wrangler Subscription \$12

**Please make checks payable to CSSHA.**

***The membership year runs from January 1 through December 31***

In consideration of my participation, I, the undersigned, do hereby (for myself or my executors and administrations) waive, release, and forever discharge the Cowboy State Stock Horse Association (CSSHA) and the operators of the venue in which any event CSSHA holds a show, clinic, fun day or any such equine related activity, CSSHA officers, members, agents, employees, and/or volunteers from any and all legal claims or liability on my behalf for any loss, damage, or injuries to my person or property arising out of my participation in such event. I understand that entry into the restricted area and/or my participation contains Danger and Risk of Injury or Death, that animals are dangerous and unpredictable, and that there is Inherent Danger in which I fully understand and voluntarily assume as my conscious choice. I further understand that the arena surface, access ways or lack thereof, lighting or lack thereof, and weather conditions all change and pose a possible danger to me. **I voluntarily elect to Accept All Risks connected with entry into any event CSSHA holds and the venue the event is held in..**

Name of Contestant \_\_\_\_\_

Signature of Contestant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

For office use:

\_\_\_\_ Member name and address sent to The Wrangler News

\_\_\_\_ Member has been given a CSSHA rulebook