

## KHJA Membership Application Payable via check or PayPal @ www.khja.com

Single: \$30.00 Family: \$50.00 Barn/Club/Organization: \$40.00

MEMBERSHIP FOR:			DATE:						
EMERGENCY CONTACT NAM	IE & NUMBER								
Rider's Name(s) Please Circle: Adult Child	Date of Birth (18 or under)	КН	KHJA Number			Trainer's Name			
STREET:		CIT	Y:			STATE:			
ZIP:EMAIL:		PH	IONE:				_		
	s, Rule Book, Entry Forms and Shov								
Rider/Horse Experience	ce – Required Information	18"	2'	2'6"	3'	3'3"	3'6"	4'	
Highest level RIDER has competed in last 36 months									
Highest level HORSE has competed in last 36 months									
year. Every class entry at a KHJA competition agent, coach, driver, handler, rider and horse and agents, the facility owners and operators aware that horse sports and the competition agree to indemnify the KHJA and its Board of or not such injury, claim or loss resulted dir WARNING: Under Kansas law, there is no lial pursuant to section 1 through 4. You are ass include, but shall not be limited to: (1) The p may result in an injury, harm or death to per objects, persons or other animals; (3) certain to act in a negligent manner that may contribability.	n shall constitute an agreement and affirmation the of themselves, their principle, representatives, et and the KHJA and its Board of Directors harmless of involve inherent dangerous risk of serious injury of Directors harmless from and against all claims inclectly or indirectly from the negligent acts or omissibility for an injury to or the death of a participant is suming the risk of participating in this domestic arropensity of a domestic animal to behave in ways, sons on or around them; (2) The unpredictability of hazards such as surface and subsurface conditions oute to injury to the participant or others, such as for	at all participar mployees and a for any action t. or death. In par uding for any ir sions of said co n domestic anir imal activity. i.e. running, bu f a domestic ar ; (4) collision w failing to maint	nts (which inc agents; (1) Ag aken; and (2) rticipation the hjury or loss s ampetition, it: mal activities C.S.A. 60-4001 ucking, biting, nimal's reactic rith other don ain control or	luded withouree to hold to Agree that to Agree that to ye expressly uffered durits is employees resulting fro to through 60 kicking, shyi on to such the mestic anima wer the dome	ut limitation he competit he c	, the owner, I ion, its managate voluntarily and all risks on ection with to the facility ent risks of doen trisks of doen trisks of dong, rearing, fall adds, sudden m, and (5) the por not acting	essee, trainer gers, officials, r in the compro- of injury or lose hinjury or lose y owners and somestic anima comestic anima ling or steppi sovement and potential of a	r, manager, employees etition fully ss and they on whether operators. al activities, al activities, al activities ing on, that d unfamiliar participant	
PARENT/ LEGAL GUARDIAN SIGNATURE			PRINT:						
	nable to attend the Annual Meeting, I name th							one vote.	
Topeka, KS 66618  CHECK #  AMOUNT:			Please Note: Horse, Rider, Owner/Lessee mus all be KHJA members for reduced entry fees and for all points earned to count toward Year-End Awards.						