



**2008  
RMQHA Ranch Horse Registration  
Introduction to Versatility Ranch Horse  
Regional Partners Program**



**Note:** This clinic will explain the ins and outs of the Versatility Ranch Horse event and will include a riding clinic on ranch riding, ranch trail, ranch cutting, working ranch horse, and ranch conformation.

<b>February 29- March 1 &amp; 2</b>	<b>March 7, 8 &amp; 9</b>	<b>April 11, 12 &amp; 13</b>	<b>April 25, 26 &amp; 27</b>
Barnes Ranch Larkspur, CO	CO State Fairgrounds Pueblo, CO	Blue Allen Arena Alamosa, CO	Double G Ranch Briggsdale, CO

*Learn this multi-skilled event in a safe, relaxed format. Jeff & Gerrie Barnes, experienced VRH clinicians, will guide you through the classes, AQHA Rules and Regulations and answer your questions with plenty of time to practice. OPEN TO ALL AGES, BREEDS AND SKILL LEVELS.*

For information on all four clinics, contact Gerrie Barnes at (303) 646-9855  
or email at [gjbarnes111@msn.com](mailto:gjbarnes111@msn.com)

Participant _____
Address _____ City/State _____ Zip _____
Email _____ Phone _____

Registration Fee = \$285.00 per person per clinic	Stalls = \$15 per day x ___ days = \$ _____
Audit Fee = \$25.00 per person per day	Shavings = \$6.50 per bag = \$ _____
	<b>Total: \$ _____</b>

*Please fill out one form per person for each clinic you are attending. Please circle the clinic you are applying to attend. Limited to 16 riders per clinic, no limit on auditors.*

**Payment:** Please make checks payable to RMQHA and send to **RMQHA, 4701 Marion St., Suite 307, Denver, CO 80216**. A 3% fee will be added to payments made with credit cards. No partial payments may be made.

Name on card: \_\_\_\_\_ Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Cancellation Policy:** 10 days or more: 100% refund; 9 days or less: decision by event manager to provide a partial refund depending upon expenses or a full refund if a replacement rider is substituted.

<p><b>Release:</b> Under Colorado Law, an equine professional is not liable for injury to or death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Section 13-21, Colorado Revised Statutes. I/We hereby request to enter the event indicated and agree to abide by the bylaws, standing rules, judging, and rules of the respective organizations involved with this event. I/We hereby release AQHA, RMQHA, and other involved organizations, its members and employees, and anyone associated with this event including the clinician(s) from any loss to myself, employees, agents, horses, vehicles, and/or equipment while attending and/or participating in this event. The provisions contained herein are hereby made a part of this entry agreement.</p> <p align="right">_____ Date _____</p> <p align="center">Signature – Participant</p>
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**PLEASE COMPLETE:**

Are you a 2008 member of Rocky Mountain Quarter Horse Association?  Yes  No  
 Have you participated in a Versatility Ranch Horse clinic, event, or competition?  Yes  No