

OPEN YOUTH ALL-WESTERN SHOW

SPONSORED BY ACE BRONCO BUNCH 4-H CLUB

SATURDAY EVENING JUNE 24, 2017 – RAIN OR SHINE

6:00 PM START (NO ARRIVALS BEFORE 5:00 PM)



KRAUS FARMS EQUESTRIAN CENTER, 333 HILLSBORO ROAD, ST. LOUIS MO 63049

North Outdoor Arena

1. SR Western Showmanship
2. JR Western Showmanship
3. SR Western Walk Trot
4. JR Western Walk Trot
5. SR Ranch Pleasure
6. JR Ranch Pleasure
7. SR Egg & Spoon
8. JR Egg & Spoon

South Outdoor Arena

9. SR Western Horsemanship
10. JR Western Horsemanship

North Outdoor Arena

11. SR Barrel Race
12. JR Barrel Race
13. SR Flag Race
14. JR Flag Race
15. SR Mystery Class
16. JR Mystery Class
17. SR Keyhole Race
18. JR Keyhole Race
19. SR Pole Bending
20. JR Pole Bending

Ages as of January 1st, 2017

JR: Ages 8-12

SR: Ages 13-18

Per class fees

\$5 each (\$25 max) for pre-entries received before June 20th

\$7 (\$35 max) after June 20th and day of show for additional classes

Rosettes awarded through 6th place

High Point and Reserve awarded for both age groups

High Point based on horse/rider combination

Door prizes in every class!

Judge: Patricia Meller

Thank you to our 4-H families and sponsors:



All exhibitors are REQUIRED to wear ASTM/SEI approved helmets when mounted. Boots, long-sleeve shirts and pants/jeans required. All decisions of the judge are final.

Warm-up arenas available. Trailers enter main gate and park at the back of the property near the show and warm-up arenas. Check-in located at the rear of the main complex/lesson barn.

NO REFUNDS for dropped classes. Request tack changes at entry gate at least 2 classes in advance, 3 minute gate hold. No stallions. Dogs must be leashed at all times and kept in trailer area. Concessions available. No alcohol allowed on the premises.

NEGATIVE COGGINS dated within the last 12 months is required to be shown at arrival or sent with pre-entry.

MAIL or EMAIL pre-entries to acebronco4h@gmail.com or P.O. Box 291, De Soto, MO 63020 by June 20th. A pre-entry includes: 1) completed entry form, 2) completed UM Extension Participation & Emergency Contact Form with Waiver & Release and 3) copy of current coggins. Checks may be mailed or paid on day of show.

See more Horse Show Information at www.mohorseshows.com

ACE BRONCO BUNCH 4-H CLUB
 OPEN YOUTH ALL-WESTERN SHOW ENTRY FORM
 JUNE 24, 2017

ONE FORM PER HORSE/RIDER COMBINATION

Exhibitor Name: _____

Exhibitor Date of Birth: _____

Address: _____

Horse Name: _____

	Circle one:			Circle one:	
Western Showmanship	SR	JR	Barrel Race	SR	JR
Western Walk/Trot	SR	JR	Flag Race	SR	JR
Ranch Pleasure	SR	JR	Mystery Class	SR	JR
Egg & Spoon	SR	JR	Keyhole Race	SR	JR
Western Horsemanship	SR	JR	Pole Bending	SR	JR

Total # of Classes: _____ x \$5.00 (pre-entry) = \$_____ or \$25.00 max

_____ x \$7.00 (day of show) = \$_____ or \$35.00 max

WARNING: Under Missouri law, an equine professional is not liable for any injury to or death of a participant in equine activities resulting from the inherent risks of equine activities pursuant to the Revised Statutes of Missouri.

I accept the terms of the Ace Bronco Bunch 4-H Club and understand that Missouri 4-H Horse Shows are guided by current AQHA rules for Western classes.

By signing below and in consideration of my participation in the Ace Bronco Bunch 4-H Club Open Youth Show ("Youth Event"), I understand and agree to release Kraus Farms from all resulting liability and loss, including but not limited to property damage, personal and bodily injury, other damages and attorney's fees from the Youth Event. I further assume and accept all risk associated with the Youth Event.

Signed: _____ Date: _____

Signature of Parent/Guardian: _____

PRE-ENTRIES CLOSE ON JUNE 20TH, 2017. MAIL TO: P.O. BOX 291,
 DE SOTO, MO 63020 OR EMAIL TO ACEBRONCO4H@GMAIL.COM

Event / Program: Ace Bronco Bunch 4-H Open Youth Horse Show

Date(s): June 24 and/or July 8, 2017

PARTICIPATION & EMERGENCY CONTACT FORM

Participant Name: _____ Birthdate: _____

Name of Parent/Guardian(s): _____

Phone Number:() _____ Mobile Number() _____

Email Address: _____

Mailing Address: _____

Please list and provide explanation of any health condition(s), dietary need(s) or allergies/
reactions: _____

Please list all medications you are bringing and the reason: _____

Please list two people, other than parents, that we can contact in an emergency.

Name: _____ Phone: _____
Name: _____ Phone: _____

If necessary, I approve of officials taking my child, to the nearest healthcare provider for medical treatment. I further understand that, should a health problem arises; I will be notified as soon as possible. If I cannot be reached by phone or other means, I consent to medical treatment, including surgery, as deemed necessary by competent medical personnel.

Signature of Parent/Guardian: _____ Date: _____

Photo Release

I authorize the University of Missouri to make pictures and sound recording of my child and use the same in any form for its purposes and consent that the pictures and recording may be copied, published, telecast or broadcast for such purposes together with descriptions and editorial statements. The University of Missouri is not responsible for third party photographs.

Signature of Parent/Guardian: _____ Date: _____



Waiver & Release

Education events and activities are coordinated by the University of Missouri 4-H Youth Development Programs. All participants must observe the following guidelines for conduct:

- Participate fully in all sessions.
- Show respect for property/facilities used during the event and assume financial responsibility for any damages caused.
- Follow the established agenda and expectation for behavior.
- Use appropriate language and wear acceptable clothing at 4-H activities and events.
- Use no alcohol, stimulants, non-prescription drugs or tobacco products.

I understand and accept the responsibility for following the above guidelines and understand that failure to do so will result in dismissal from the event or activity. Further, I accept financial responsibility for damage to property or materials, travel cost and/or program cost that might result from violation of this agreement. I understand and agree that in consideration of the acceptance in these activities, we release 4-h, the Curators of the University of Missouri, their respective officers, agents and/or employees from all liability and loss (including court cost and attorney fees) resulting from any property damage, personal injury and bodily injury including death to me in the course of these events. We will be bound by all rules and regulations while participating in said events.

Signature of Parent/Guardian: _____

Date: _____

4-H Youth Guidelines

All youth who participate in 4-H Youth Development Programs, which are planned, conducted, and supervised by University of Missouri Extension, are responsible for their own conduct. Youth participating in 4-H programs are expected to demonstrate the character traits of trustworthiness, respect, responsibility, fairness, caring, and citizenship. Specifically, 4-H youth are expected to abide by the following behavior guidelines.

1. Be courteous and respect others.
2. Obey all rules established by the University of Missouri 4-H Youth Development Programs and those of the local clubs/groups as well as local and state laws.
3. Treat all people fairly and animals humanely.
4. Respect the property of others.
5. Respect the authority of adult or youth volunteers, paid Extension staff, and other in leadership roles.
6. Use appropriate language and wear acceptable clothing at 4-H activities and events.
7. Show kindness to others and give assistance when needed.
8. Be honest and honor commitments.
9. Strive for personal best and keep trying to improve.
10. Accept responsibility for personal choices.

We understand and accept the responsibility for following 4-H Youth Behavior Guidelines. We further understand that failure to do so may result in disciplinary action and forfeiture of participation privileges.

Signature of Participant: _____

Date: _____

