

NORTHERN OHIO OUTLAWS COWBOY MOUNTED SHOOTING CLINIC

Ready to get started in cowboy mounted shooting? Join us for an informative clinic with you and horse!

Where? Ruggles Arena, 2651 Township Rd 155, Cardington, Ohio 43315

When? Sunday April 24, from 9 AM - 3 PM (Arrive at 8 AM)-

What? Experienced horsemen & Mounted Shooters will lead three different sessions consisting of

- gun safety and ground shooting
- cowboy mounted shooting period clothing
- horsemanship followed by competition style training

Cost? \$115 for new shooters which includes a \$25 credit towards your Northern Ohio Outlaw membership. Current Outlaws bringing a new horse cost is \$65. National membership requires an additional fee. Send payment along with liability form to:

> 6737 Dueber Ave. SW East Sparta Ohio 44626

northernohiooutlawsinfo@gmail.com

Clinic Sunday April 24, 2022

Indoor Riding Facility @ Ruggles Arena

Club Provides Guns, Holsters, and Ammo

Limited Space Available Sign up Early!

Questions? Call Janessa Hill (330) 201-2447 or Dwayne Joyner (330) 205-3130

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April 24, 2022 at *Ruggles Arena*

Name	
	State: Zip:
E-mail:	Phone:
Mai	lub Liability Form and Advance Deposit to Confirm Spot to: Emily Soehlen 6737 Dueber Ave SW East Sparta, Ohio 44626
	LIABILITY RELEASE FORM
including but consideration f the Cowboy M have and do he The contest sha or employees f	I am participating in sport in which contains dangers and risks may arise, t limited to, accidental injury, the forces of nature, and illness. In the right to participate in these events and the services provided for me by nted Shooting Association (CMSA), Northern Ohio Outlaws, and its agents, I by assume the risks associated with such events. At his own expense, defend management and/or all sponsors, their members, m any and all such claims and indemnify, from any and all liability, damages from injuries to person or property occasioned by any act or omission of the
•	f applicant is required (unless under 18 years of age, then parent or guardian signature is required) Additional Arena Liability Form May Be Required
Signature: _	Date:
Office Use O	
Date Receive	Paid Amt.: Check#Cash Amt.