

FT MEADE ENDURANCE RIDE ENTRY

RIDER'S NAME: _____ AERC #M _____
Friday Horse's Name _____ AERC#H _____
Owners Name and AERC # _____
Saturday HORSE'S-NAME: _____ AERC#: H _____
OWNER'S NAME/AERC # M _____
Sunday///(if-different)-HORSE'S-NAME: _____ AERC#: H _____
OWNER'S NAME/AERC # _____
EMERGENCY CONTACT _____

Please check appropriate boxes for each day's ride:

\$145 each day for 25 and 50 mile ride/ \$75 for Juniors, \$55 each day for Intro rides

Weight_Divison FWT(0-160 w/tack) LWT(161-184) MWT (185-210) HWT (210 +)

() FRIDAY 25 () OR 50 () \$ _____

() SATURDAY 25 () OR 50 () \$ _____

() SUNDAY 25 () OR 50 () \$ _____

\$20 per day AERC Non- Member Fee \$ _____ ***** Show member card*****

() \$55 intro Friday \$ _____

() \$55 intro Saturday \$ _____

() \$55 intro Sunday \$ _____

Deposit paid (deduct from your last entered day) __\$ _____

Multi Day discounts- deduct \$10 FOR 2ND DAY ENTRY 25/50 \$ _____

deduct \$15 for 3rd DAY ENTRY 25/50 \$ _____

RIDE CAMP FEE (PER PERSON) \$35.00

MAKE CHECKS TO BLACK HILLS ENDURANCE TOTAL \$ _____

FORT MEADE RIDE WAIVER CONTRACT: I have entered the Ft Meade Endurance Ride and agree to ride by all their rules, as well as those of the AERC. I understand that endurance riding is a hazardous activity, which often involves being in remote areas far from medical aid. I understand that I am riding the event at MY OWN RISK, and will assume FULL RESPONSIBILITY for my safety, those in my party and my horse(s). I acknowledge the fact that, while I am on my own, my horse is under veterinary supervision, and I agree to abide by the veterinarian's decisions, as at this ride the veterinarian's word is FINAL. I will not argue, debate or dispute the vet's instructions, nor will I shirk my duty of paying the vet bill if my horse is in need of treatment. I do understand that abuse of the horse is strictly forbidden.

In addition, I and my heirs, executor, and administrator, will hold AERC and officers thereof, any member of the Ft Meade Endurance Ride management and officers thereof, Ft Meade, absolutely BLAMELESS for any injury or loss to myself or my horse which occurs due to my participation, and free them from all liability for such injury or loss.

SIGNATURE OF PARTICIPANT _____ DATE _____

SIGNATURE OF PARENT/GUARDIAN: if under 18 _____ DATE _____