

Friday Rider #

Sat #

Sun #

Black Hills Endurance Pioneer Entry

RIDER'S NAME: _____ Phone # _____

Email _____

AERC #M _____

Friday Horses's name _____ AERC # H _____

Distance _____

Saturday HORSE'S-NAME: _____ AERC#: H _____

Distance _____

Sunday-HORSE'S-NAME: _____ AERC#: H _____

Distance _____

EMERGENCY CONTACT _____ # _____

\$145 each day for 25/30 and 50 mile ride/ \$100 for Juniors, \$65 each day for Intro rides

\$170/\$125/ \$75 if registered after Aug 22 or if no deposit was received.

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

\$20 per day AERC Non- Member Fee \$ _____

RIDE CAMP FEE (PER Adult rider/Per night) \$25 ___ nights _____

MAKE CHECKS TO BLACK HILLS ENDURANCE ___ TOTAL \$ _____

RIDE WAIVER CONTRACT: I have entered the Black Hills Endurance 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 Endurance Ride management and officers thereof, 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 _____