



2025 Ranch Riding Registration

Rider Name _____ MRC Member Y / N If Yes, Member # _____

Horse Name _____

Address _____ City _____ Zip _____

Signature/Guardian* _____ Date _____

Emergency Contact Name/ Phone # _____

By signing, I do hereby agree to abide by ALL the rules and regulations set up by Meridian Riding Club, owners and operators of the arena and grounds. I agree to release all liability in the event of accident, loss, or misfortune, and not hold Meridian Riding Club and/ or show Producers responsible in the cause of any of these events per Washington State RCW 4.24.540

*If the rider is under 18 years of age, he/she MUST have an adult, parent, or guardian sign for permission to ride. To which the signer agrees to assume all responsibility of minor.

Classes (circle class #(s) to select)

1	6	11	16	21
2	7	12	17	22
3	8	13	18	23
4	9	14	19	24
5	10	15	20	25

OF CLASSES SELECTED _____

X \$10.00 PER CLASS = \$ _____

OFFICE FEE = \$10.00

HAUL IN FEE \$10.00 (NON-MEMBER ONLY**) x \$ _____

TOTAL DUE = _____

SHOW OFFICE USE:

Rider # _____

Total Paid _____

PAID _____ Cash/Check

_____ Square

Registration Forms and Payments can be mailed to:

Meridian Riding Club

11202 119th St. E, Puyallup, WA 98374

Or online via Webpage meridianriding.com