**Distance Riding Mock Ride Entry Agreement**

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**Rider name** **Horse name**

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**Email address** **Horse owner name**

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**Street Sex Color Age Breed**

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**City State Zip Phone**

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**Emergency Contact Name Emergency Contact Phone**

**Read Carefully Before Signing**

I wish to participate in the above -named event, attending the event premises with my horse(s) and possibly with family of other support. All references herein to “me”, “I” or “my” or such other designation shall include my family and support group, together with my equine(s) or other pets or animals. I acknowledge I am speaking for them in making my entry and am responsible for their behavior and safety. In participating, I fully understand and recognize the inherent risks and dangers involved (whether directly explained but certainly as reasonably foreseeable or as should have been reasonably foreseeable to a prepared participant), as well as the fact that significant unanticipated, uncontrollable and unexpected risks may arise during the mock ride. I understand that the mock ride will involve being in remote areas for extended periods of time, far from communications, transportation and medical facilities. I recognize other persons may be in the vicinity of the event and whether or not they are participating directly of merely bystanders, I accept that I personally owe them a duty of reasonable care to prevent damage or injury to them, their families of property arising from my participation or the care, custody of control of my equine(s) or other animals or family or friends. I recognize the clinic management cannot eliminate or control all potential hazards to me or my horse or act to guarantee our safety. I agree to abide by the rules of the mock ride.

**WARNING: Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss or damage to any person or property resulting from the risk of equine activities.**

**WARNING: Under applicable state laws, and equine professional or even organizer, manager, or staff is, or may not be, not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.**

**WARNING: Under applicable state laws and other recreational or equine activity liability act(s), and equine professional or event organizer, manager or staff is, or may not be, not liable for an injury to or the death of a participant of the horse(s) of a participant in an equine activity resulting from an inherent risk of the equine activity.**

**NOTICE: A person who is engaged for the compensation in the rental or equines or equine equipment or tack or in the instruction of a person in the riding or driving of an equine or in being a passenger upon an equine may not be liable for the injury or death of a person involved in equine activities resulting from the inherent risks of equine activities, as defined in applicable state laws.**

**NOTICE: Riders and equine owners must carry their own personal liability and person healthcare coverage. The Distance Riding Clinic insurance does NOT cover ride participants for person liability or their family or supporters personal healthcare or emergency or veterinary care.**

I know and understand distance riding is an inherently dangerous sporting event and agree to assume the complete risk of injury or damage which my horse might sustain or cause in participating or attending this mock ride. As a result, I agree to indemnify and hold harmless the clinic management, ride landowners, veterinarians, ride members and agents from and against all loss or damage, including property loss suffered during or in connection with the loss, resulted directly or indirectly from negligent acts or omissions of the clinic management, ride landowners, ride veterinarians, GLDRA, AERC, their directors, officers, committee members or agents.

**I HAVE READ AND UNDERSTAND THIS RELEASE. IF I AM A MINOR (UNDER 18) I UNDERSTAND I MAY NOT PARTICIPATE WITHOUT THE LEGAL PERMISSION OF MY PARENT/LEGAL GUARDIAN.**

**Rider’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

As parent and /or lagan guardian of the above-named minor rider, for and in consideration of this minor’s participation in the mock ride, I agree to the terms above-stated as well on behalf of myself, my family and this minor, and will hold harmless anyone so consenting. **I HAVE READ AND UNDERSTAND THIS RELEASE.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

04/2022