

Recd \_\_\_\_\_  
Paid \_\_\_\_\_  
Due \_\_\_\_\_

# Name of Ride

Date of Ride \_\_\_\_\_

Rider \_\_\_\_\_ Age \_\_\_\_\_ Rider AERC# \_\_\_\_\_

Division:  HWT (211# & up)  MWT (186-210#)  LWT (161-185#)  FWT (160# & below)  JUNIOR

Address \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ E-mail address \_\_\_\_\_

Horse \_\_\_\_\_ Breed \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Color \_\_\_\_\_ AERC # \_\_\_\_\_

Owner's Name/City/State \_\_\_\_\_ Owner AERC# \_\_\_\_\_

As a participant in the \_\_\_\_\_ Ride, I agree to abide by the Rules of AERC and the aforementioned ride. I understand that endurance riding involves being in remote areas for extended periods of time, far from communications, transportation, and medical facilities; that these areas have many natural and man-made hazards which ride management cannot anticipate, identify, modify, or eliminate; that horses can be excitable, difficult to control, and unpredictable; and that accidents can happen to anyone at any time. I agree to take full responsibility for myself and the animal I am riding. I will hold AERC, ride management, all ride personnel, and all property owners over whose land the ride passes blameless for any accident, injury, or loss that might occur due to my participation in this ride, and free from all liability for such injury or loss.

Junior riders (under 16 years as of the first day of the current ride season) entered in the ride will be accepted and allowed to ride only if accompanied by an adult rider (21 or over). Juniors will not be allowed to start or continue on from any point without an adult sponsor. **JUNIOR RIDERS MUST WEAR PROTECTIVE HELMETS.**

I HAVE READ THE RULES, CONDITIONS AND REGULATIONS OF THIS RIDE AND WILL ABIDE BY THEM. PARENT/GUARDIAN SIGNATURE GIVES PERMISSION FOR EMERGENCY MEDICAL TREATMENT FOR JUNIOR.

Rider's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Junior Date of Birth \_\_\_\_\_ Name of Sponsor \_\_\_\_\_

Junior - Entry Fee .....	\$150.00 .....	\$ _____
Senior - Entry Fee .....	175.00 .....	\$ _____
AERC Drug Testing Fee ( <b>mandatory</b> ) .....	1.00 .....	\$ _____
One-Day Membership Fee (if not an AERC member) .....	15.00 .....	\$ _____
Number of <b>extra</b> dinners wanted (one included in entry) .....	10.00 .....	\$ _____
<b>EARLY ENTRY*</b> .....	<b>Subtract 25.00</b> .....	\$ - _____
	TOTAL .....	\$ _____

\*Deduct \$25 for entries postmarked by \_\_\_\_\_. Checks must be included with entry to receive discount.

Please make checks payable to \_\_\_\_\_. Please return entry and check to \_\_\_\_\_  
\_\_\_\_\_. For information, contact Ride Manager \_\_\_\_\_ at  
\_\_\_\_\_ or \_\_\_\_\_.