

RIDE BETWEEN THE RIVERS
RIDE & TIE
August 7,2021

Notice:All out of state horses must have a current health certificate when entering WV.

Proceeds benefit the Randolph County Regional Riding Club.

Rider #1 Info:

Rider Name _____ AERC# _____

Address _____

Phone _____ Email _____

Rider #2 Info:

Rider Name _____ AERC# _____

Address _____

Phone _____ Email _____

Horse Info:

Horse Name _____ AERC# _____

Age _____ Breed _____ Color _____

Horse Owner _____ Contact Number _____

★ **Please attach a copy of current negative coggins or bring with you to the ride to show at registration!!**

<p>FEES: ___30 Mile Ride\$100.00/ after July 24\$120.00 ___Introductory 15 Mile Ride....\$60.00 ___Day Rider fee (Non AERC Members Only) ...\$15.00 Extra meal tickets: \$12 each (Each riders gets dinner ticket for Friday and Saturday dinners included in entry) ___ Number or Meal Tickets Total Due: _____ Amount Paid: _____ Due at Ride: _____</p> <p>★ One fee per team!</p>	<p>Please Make Checks Payable To: RCRRC Mail Entries to: Kelsie Lewis 4910 Clarksburg Rd. Buckhannon, WV, 26201</p> <p>Questions?? Call Jennifer @(304)518-8837 cell or Kelsie @ (304)395-7265 cell Email: kelsielewis963@gmail.com jenpoling80@icloud.com</p>
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Release of Liability

❖ **Please read this release carefully and sign at the bottom.**

As a participant in this ride, I agree to abide by the rules of AERC and the Randolph County Regional Riding Club (RCRRC). I understand that endurance riding involves being in remote areas for extended periods of time, far from communication, transportation, and medical facilities, that these areas have many natural and manmade hazards, which management cannot anticipate, identify, modify, eliminate, or control, 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 management, all ride personnel, volunteers, members of the RCRRC, and all property owners over whose land the ride crosses blameless for any accidents, injury, or loss that might occur due to my participation in the ride, and free from all liability for such injury or loss.

I HAVE READ AND UNDERSTOOD THIS LIABILITY RELEASE

Rider's Signature: _____ Date: _____

Parent or Guardian (for Junior Rider): _____

Horse Owner's Signature: _____