

HUNTER PACE EVENT



Saturday, September 13, 2014
Southmowing Stables, Guilford, VT



Official Use Only

Rider #1 _____	<input type="checkbox"/> Paperwork	<input type="checkbox"/> Paid	<input type="checkbox"/> Liability
Rider #2 _____	<input type="checkbox"/> Paperwork	<input type="checkbox"/> Paid	<input type="checkbox"/> Liability
Rider #3 _____	<input type="checkbox"/> Paperwork	<input type="checkbox"/> Paid	<input type="checkbox"/> Liability
Start Time:			<input type="text"/>

09/13/2014

Date of Pace

A Ride to Benefit the Hounds

*Rider #1	Rider #2	Rider #3
Rider's Name	Rider's Name	Rider's Name
Horse's Name	Horse's Name	Horse's Name
Mailing Address	Mailing Address	Mailing Address
City, State, Zip code	City, State, Zip code	City, State, Zip code
Email Address	Email Address	Email Address
Phone Number with Area Code	Phone Number with Area Code	Phone Number with Area Code
Hunt Affiliation	Hunt Affiliation	Hunt Affiliation

Start times: 8:00 am – 10:30 am

Divisions: Jumping Flat
 Age Group: Adult Junior
 Club Affiliation: Pony Club 4-H

Preferred Start Time:

*Single Hunter Pace Entrants
will be placed in teams.

Entry Fee:

Checks payable to Guilford Hounds

Adults: \$50.00

Juniors: \$40.00

Send Entries To:

Tess Winterling
2694 Creamery Road
Guilford, VT 05301
802-380-3465

Send copy of negative coggins, and
proof of rabies vaccine with check
payable to Guilford Hounds and
completed entries to:

Tess Winterling
2694 Creamery Road, Guilford, VT 05301
HP@guilfordhounds.com



Lunch will be provided.





GUILFORD HOUNDS HUNTER PACE

RELEASE OF LIABILITY



I have full knowledge of the potentially hazardous nature of riding horses. I wish the Guilford Hounds Hunt and the Guilford Hounds Hunter Pace Committee to allow me to ride in the Guilford Hounds Hunter. As partial consideration therefore, I hereby waive on behalf of myself, my heirs and my dependants any liability that the Guilford Hounds Hunt, the Guilford Hounds Hunter Pace Committee, its officers, their agents or employees, and volunteers, or the landowners over whose land the Hunter Pace riders, their agents or employees might have, and agree that said club, committee, landowners, officers, agents, volunteers or employees shall not be liable for any bodily injury to me or damage to my property, or to any horse ridden by me, incurred while I am participating in the Guilford Hounds Hunter Pace. I hereby assume all risks of any and all bodily injury or property damage that may arise from this event.

Rider #1:

Print Name: _____

Signature*: _____ Date: _____

Rider #2:

Print Name: _____

Signature*: _____ Date: _____

Rider #3:

Print Name: _____

Signature*: _____ Date: _____

*If the rider is under 18 years of age, the release below must be signed.

I am the parent or guardian of the above minor, and on said minor's behalf and on my behalf and the behalf of all other parents or guardians of said minor, I hereby agree to the above liability release terms as an inducement for allowing said minor to participate in the Guilford Hounds Hunter Pace.

Rider #1 Parent/Guardian:

Print Name: _____

Signature: _____ Date: _____

Rider #2 Parent/Guardian:

Print Name: _____

Signature: _____ Date: _____

Rider #3 Parent/Guardian:

Print Name: _____

Signature: _____ Date: _____