

GMHA Memorial Day Pleasure Rides Entry Form

May 29-30, 2021

Opening Day: April 28. Closing Day: May 21. Post entry fee of \$25 applies after 5PM, May 21.

Refunds, less a processing fee, will be granted when requested in writing (or emailed) by May 21, 5pm.

The processing fee is \$25. No refunds after the closing date. Refunds of entry fees will not be given in the event all or part of the rides are cancelled due to a storm, accident, or other emergency.

Rider		Owner	
Name		Name <input type="checkbox"/> Same as rider	
Address		Address	
City/State/Zip		City/State/Zip	
Email		Email	
Phone #		Phone #	

Horse			
Name		Breed	
Age	Sex	Coggins & Rabies <input type="checkbox"/> Enclosed <input type="checkbox"/> On File	Color

Multi-Day Rides- All Inclusive	Includes	Non-Mem	Member	Junior (< 21)
<input type="checkbox"/> 5/29-5/30 Saturday & Sunday Pleasure Ride	Fri & Sat night stabling, breakfast on both days, lunch on Sat, lunch on Sun	\$155	\$125	\$45

Single Day Rides- a la Carte (overnight stabling not included but can be added below)				
<input type="checkbox"/> 5/29 Saturday Pleasure Ride	day stall, breakfast & lunch on 5/29 day stall, breakfast & lunch on 5/30	\$65/day	\$50/day	\$25/day
<input type="checkbox"/> 5/30 Sunday Pleasure Ride				

No Frills Ride- NO FOOD				
<input type="checkbox"/> 5/29 Saturday No Frills Ride	Day stall for your horse. On trail water. Marked trail- short & long options. NO FOOD included.	\$30/day	\$25/day	\$12/day
<input type="checkbox"/> 5/30 Sunday No Frills Ride				

Stabling (Tack stalls are not guaranteed. Please purchase if you wish to have your own tack stall.)		Fees	
Barn Preference & Stable with:		Ride Entry Fee \$ _____	
		Total Stabling/Hay/Shavings Fees \$ _____	
<input type="checkbox"/> Fri 5/28 <input type="checkbox"/> Sat 5/29 <input type="checkbox"/> Sun 5/30 Member Overnight Stabling	\$30 x _____	Extra Saturday 5/29 Brkfst/Lunch \$20 x _____	
<input type="checkbox"/> Fri 5/28 <input type="checkbox"/> Sat 5/29 <input type="checkbox"/> Sun 5/30 Non-Member Overnight Stabling	\$45 x _____	Extra Sunday 5/30 brkfst/lunch \$20 x _____	
Hay (per bale)	\$10 x _____	Post Entry Fee (after 5/21, 5PM) \$25 _____	
Shavings (per bag)	\$10 x _____		
Total Stabling/Hay/Shavings Fees	\$ _____	TOTAL FEES \$ _____	

Food Allergies

Although we can't guarantee that we can meet your preferences, we will certainly try if you make them known. We are not an allergic free facility.

Vegetarian Gluten-Free

Other:

Payments (Full payment is due with entry)

Check # _____ MC/ Visa/ Discover Cash

Credit Card #: _____ CCV: _____

Exp: _____ Signature: _____

INDIVIDUAL AGREEMENT AND WAIVER OF LIABILITY WARNING

Under Vermont Law, an equine activity sponsor is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities that are obvious and necessary, pursuant to 12 V.S.A. § 1039. (Added 1995, No. 136 (Adj. Sess.), § 2.)

I understand that the sport of horseback riding and driving is inherently dangerous and that serious injury and death can occur. I understand that participation in equine activities involves necessary risks. I agree that if any harm occurs to me or my horse or to any equipment that I may use or intend to use, I will make no claim against the Green Mountain Horse Association, Inc. or any of the Officers, Directors, Trustees, Employees and Volunteers. I further agree to hold the Green Mountain Horse Association, Inc., the Officers, Directors, Trustees, Employees, Volunteers and Landowners free and harmless from any liability, claims, suits or damages of whatsoever kind or nature that may be occasioned by the horse(s) used by me or the negligence of the person(s) in charge of such horse(s) and I agree to indemnify and hold harmless this organization and individuals against all liability claims, suits, and expenses including attorney fees incurred arising out of any injury to any person or damage to any property caused by me, my horse(s) or attendants.

DRUG RELEASE: I hereby certify that my horse is not under the influence of medication. If entered in competitive trail, I hereby give permission to ECTRA or any duly appointed agent to check for possible administration of drugs to my horse, by any appropriate or reasonable necessary method.

I agree that as a condition of acceptance of entry, GMHA may use photographs, videos, and or other likenesses of the participant and horse taken while at GMHA for the promotion, coverage, or benefit of this event and/or GMHA.

I agree that if I am injured while participating in this event, the Woodstock Emergency Services personnel treating my injuries may provide a description of the accident, a description of the suspected injury, a description of the treatment administered and information about transport to a hospital to GMHA personnel for the purpose of completing the official GMHA Accident/Injury report. This authorization will expire once the information is given to GMHA personnel or at the end of the event, whichever is later.

SPORTSMANLIKE CONDUCT STATEMENT: I agree to: 1) Know the rules of my sport and abide by them; 2) Respect and abide by GMHA management's and show officials' decisions; 3) Maintain control of my emotions; 4) Be courteous to all at all times.

Rider/Driver- MANDATORY

Signature: _____ Date: _____

Print Name: _____

Owner- MANDATORY

Signature: _____ Date: _____

Print Name: _____

Parent/Guardian (if Rider is a minor)

Signature: _____ Date: _____

Print Name: _____

MANDATORY FOR EVERYONE

Emergency Contact # : _____

Name & Relation to You: _____

Entry forms accepted by mail, fax, email or in-person. No phone entries. NO FORM - NO ENTRY

Mail completed entry form & payment to: GMHA, Attn: Trails, PO Box 8, S Woodstock, VT 05071

Email to wendy@gmhainc.org OR Fax to (802) 457-4471

Or in person at the GMHA office – Monday – Friday, 9am – 4pm.