



**Barbara Meyer Memorial Hunter Pace
at Wethersfield (214 Pugsley Hill Rd, Amenia, NY)*
Sunday, October 25, 2015**

- **First team of 2 or 3 Riders out at 9 am (last team out at Noon). Please bring water for horses.**
- **First Flight or Hilltopper Divisions**
- **\$60 per Rider pre-entered (add \$25 for post-entries). Entry includes lunch (also available for non-riders if ordered in advance).**
- **6-8 mile Course, all jumps with go-arounds**
- **Ribbons 1st - 8th place for each Division**
- **Casual attire. Proper boots, helmets, Coggins.**
- **Contact mchamberlin@emta.org for times.**
- **Send pre-entries to Teal Atkinson, PO Box 468, Salisbury, CT 06068, with checks payable to Millbrook Pony Club.**

***Proudly part of the Hudson Valley Pace Series!**

Millbrook Pony Club
Barbara Meyer Memorial Hunter Pace
October 25, 2015
at Wethersfield Farm
214 Pugsley Hill Road, Amenia, NY 12501

I understand that this is a HIGH RISK SPORT, and I am participating at my own risk. I assume complete responsibility for any injury, accident, or loss incurred while a participant in the Millbrook Pony Club Hunter Pace. Neither I nor my representative, assignees, or heirs shall make any claim against, maintain an action against or recover from the Millbrook Pony Club or its officers or other volunteers, or Wethersfield or its officers, employees or volunteers, or any property owners over whose land the course is laid or any other organization or persons associated with the event, for injury, loss, damage or death to myself or my property, resulting from participation. (FOR RIDERS UNDER 18 YEARS OF AGE, LEGAL GUARDIAN, NOT TRAINER MUST SIGN) I, the legal guardian of the named minor, have read and understand the risks associated with this event and give permission to participate.

Please clearly print your information below & fill in all the blanks.

Team Member #1 Name: _____

Address: _____

Email: _____ **Phone#:** _____

Signature: _____

AMOUNT: \$ _____

Team Member #2 Name: _____

Address: _____

Email: _____ **Phone#:** _____

Signature: _____

AMOUNT: \$ _____

Team Member #3 Name: _____

Address: _____

Email: _____ **Phone#:** _____

Signature: _____

AMOUNT: \$ _____

Additional Lunches @ \$15.00 each: \$ _____

Additional Donation: \$ _____

Total Enclosed: \$ _____

DIVISION: (CIRCLE ONE) FIRST FLIGHT HILLTOPPER

PLEASE MAKE ALL CHECKS PAYABLE TO "Millbrook Pony Club"

Please mail Pre-Entries to: Teal Atkinson, PO Box 468, Salisbury, CT 06068

Team # _____ Payment Amount Received _____ Cash or check: _____

HOMELAND FOUNDATION

WETHERSFIELD

Amenia, NY

HOMELAND FOUNDATION RELEASE AGREEMENT HORSEBACK RIDING AND CARRIAGE DRIVING ON WETHERSFIELD PROPERTY

WITNESS THIS AGREEMENT, this _____ day of _____, 20____, by and between HOMELAND FOUNDATION and WETHERSFIELD, hereinafter referred to as MANAGER and _____, hereinafter referred to as RIDER. For consideration received, and in return for the use, today and on all future dates of the property, facilities and services of Manager, Rider, Rider's heirs, assigns, and representatives, hereby agree as follows:

1. Inherent Risks and assumption of Risk. The undersigned acknowledges there are inherent risks associated with equine activities such as described below, and hereby expressly assumes all risks associated with participating in such activities. The inherent risks include, but are not limited to the propensity of equines to behave in ways such as, running, bucking, biting, kicking, shying, stumbling, rearing, falling, or stepping on, that may result in an injury, harm, or death to persons on or around them; the unpredictability of equine's reaction to such things as sounds, sudden movement and unfamiliar objects, persons or other animals; the limited availability of emergency medical care; and the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within such participant's ability. Rider acknowledges that horses, by their very nature are unpredictable and subject to animal whim. Rider assumes all risks in connection therewith, and expressly waives any claims for any injury or loss arising therefrom. Rider agrees to abide by and follow Manager's rules and regulations, which shall be posted and/or available from time to time. Rider further acknowledges that the behavior of any animal is contingent to some extent upon the ability of the Rider. Rider assumes all risks therefore and warrants a full and fair disclosure of Rider's abilities has been made to Manager. Rider expressly releases Manager and its representatives, agents or employees from any and all claims for personal injury or property damage, even if caused by negligence (if allowed by the laws of this State) by Manager or its representatives, agents or employees.

WARNING

You are advised that there are inherent risks, including the risk of serious injury or death, while engaging in equine activities. By engaging in equine activities and in accordance with the terms of this agreement you hereby assume all risks of injury or Death.

2. Rider agrees to hold harmless and defend Manager against, and hold harmless from, any and all claims, demands, causes of action, damages, judgments, orders, costs or expenses, including attorney's fees, whether actually incurred or not, which may in any way arise from or be in any way connected with Rider's use of or presence upon the property and Manager and the facilities located thereon.
3. In the event Rider is using Rider's own horse or a horse(s) not owned by Manager, Rider warrants said horse(s) shall be free from infection, contagious or transmittable diseases. Manager reserves the right to refuse access or use of any horse upon the premises that does not appear to Manager to be in good health, or is deemed dangerous or undesirable.
4. Any action brought under this agreement shall be brought within one (1) year of the incident or accident giving rise to said claim. Rider agrees that damages shall be limited to \$250 for property damage, actual expenses incurred, and a maximum of \$10,000 for damages such as pain and suffering.
5. Rider agrees to waive the protection of any applicable statutes in this jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know of suspect to exist at the time of executing said release.

Manager

Signature of Rider/Parent or Legal Guardian: _____

Print Rider's Full Name: _____

Rider's Phone: _____

Rider's email address: _____

(Please print legibly)

Emergency Contact Name and Phone: _____
