

COLORADO MOUNTAIN METTLE ENTRY FORM

Rider's Name _____ AERC # _____

Address _____ Mobile Phone _____

Home Phone _____ Emergency Contact On Ride

Email _____ Name _____

Phone _____

DIVISION (check one – weight includes tack)

- | | |
|---|---|
| <input type="checkbox"/> Junior (under 16 and must wear helmet) | <input type="checkbox"/> Feather (160 pounds or less) |
| <input type="checkbox"/> Light (161 – 185 pounds) | <input type="checkbox"/> Middle (186 - 210 pounds) |
| <input type="checkbox"/> Heavy (211 pounds or more) | |

I am entering for the following days and corresponding horses:

- | | |
|--|--|
| <input type="checkbox"/> Day 1: Horse's Name _____ | <input type="checkbox"/> Day 2: Horse's Name _____ |
| Age _____ AERC # _____ | Age _____ AERC # _____ |
| Horse Owner AERC # _____ | Horse Owner AERC # _____ |

Indicate all costs for mileage, one or two days, and number of horses (entry fee includes dinners for rider):

<input type="checkbox"/> 50 Miler: \$90 times # of days = _____ <input type="checkbox"/> 25 Miler: \$80 times # of days = _____ Extra Meals \$10 per day per person = _____ NON-AERC member fee \$15 x # of days = _____ ===== Total _____	Please mail this completed form and a check for the total payable to Susan Horne – mail to: P. O. Box 523 Franktown, CO 80116
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If you do not pre-register, you must present your current AERC membership card.

RELEASE FORM

I, the undersigned, do hereby state that I have read and understand the following: Riding can be a dangerous activity, horses are unpredictable animals, and endurance riding involves being in remote areas. There are hazards, manmade and natural, which ride management can neither anticipate, modify or eliminate. I therefore assume full responsibility for myself and the animal I am riding. I will hold the ride management, ride personnel, land owners, land managers, Douglas County Division of Open Space & Natural Resources, and U.S. Forest Service, whose land the ride uses blameless for any accident, injury, or loss that might occur due to my participation in the ride and free from any liability for such injury or loss. **UNDER COLORADO LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES PURSUANT TO SECTION 13-21-119, COLORADO REVISED STATUTES.**

Signature _____ Date _____

Name of Responsible Party if minor is under 18 years of age _____

Signature _____ Date _____