

Trail Ride Registration Form

Please fill out one registration form for each individual.
Children must be 12 years of age in order to ride a horse at this event.

Name _____ Age _____

Address _____
(Apt) (Street Address) (City) (Province) (Postal Code)

Home Phone _(_____)_____ Cellular Phone _(_____)_____

E-Mail Address _____

Emergency Contact _____ at (phone) _____
(name)

If you are on any medications we should know about, please list them here. This information will not be shared with anyone. It will sit in the file unless you are seriously hurt and we must know what medications you are on, or will need.

If you have any allergies, please explain them fully and list any medications used to control them

If you are under 18, you must have a guardian participating with you* and you must wear an approved helmet.

Legal Guardian's Name _____ Phone (_____) _____

Legal Guardian's Signature _____

* If a parent cannot attend, please ask if the Trail Boss will accept guardianship of your child.

Please indicate the ride location and date to which this application applies. Fundraising (\$50/day) and the registration fee (\$100) apply to each ride.

_____ Ride location _____ Ride Date _____

Whoa up, partner!

You are welcome to bring your own horse valet (aka non-riding spouse/friend), who can either hang around camp during the day or go sightseeing or help make meals ☺ ... but our new riding plan, where there are no towns feeding us , means that Wild Pink Yonder must purchase all the food for the events, so it follows that any extra people will need to register as well.

For insurance reasons
all participants must be current members of Alberta Equestrian Federation.
Join on line at www.albertaequestrian.com
or phone (403) 253-4411

If you are an AEF member already, please verify your membership number here: _____

Pledge Information

Wild Pink Yonder requires a \$100 registration fee to accompany this form.

You will be able to fundraise on-line as soon as the WPY/CRINA (Cancer Research Institute of Northern Alberta) fundraising site is up and running for the year.

Watch our Facebook page and our blog for details of when and where for the fundraising page.

Your minimum fundraising contribution must be \$50 for each day that you attend.

This is per rider per day. Horse valets don't have to fundraise, but in the spirit of the event, they are encouraged to do so.

This fundraising can be from pledge money you raise, your personal cheque or a combination of both.

Pledges can be made via cheque to Wild Pink Yonder Charitable Society, or via cash that you convert to a cheque or money order, which can be mailed to the WPY office @ Box 97, Lamont, AB, T0B 2R0 or by cheque and/or cash delivered when you arrive in camp.

Legal Waiver

This trail ride is arranged by Wild Pink Yonder Charitable Society (WPY) in support of Cancer Research Institute of Northern Alberta, University of Alberta (CRINA). WPY and CRINA do not assume liability for injury, damage, accidents, loss, delay or irregularity that may be occasioned by reason of defect in any vehicle or for failure to carry out such arrangements as mentioned. WPY reserves the right to modify the schedule as circumstances may require to expedite the trail ride and assure the safety of the trail ride participants, including dismissal of participant(s) exhibiting unruly, abusive or disruptive behaviour and participant(s) with horses WPY deems unsafe/disruptive to have around other horses.

If I have any dietary special needs or issues, I am aware that WPY will not be able to accommodate my needs. Therefore, responsibility for any special dietary needs is entirely my own and WPY and the towns involved will not be held liable for any loss or injury or medical needs, or expenses, arising from the food I voluntarily or accidentally eat on this ride.

I am aware that the activities planned, such as riding horses, contain inherent risks of injury, emotional trauma and illness. I recognize that such risks may be present at any time before, during or after the trail ride I am participating in with WPY in support of CRINA. I am also aware that adequate medical services or facilities may not be readily available or accessible during some or all of the time and that evacuation, if necessary, can be prolonged, difficult and expensive. In consideration of, and as part payment for the right to participate in, and by registering for this WPY/CRINA trail ride, events, or tours, I have and do hereby fully assume all risk of injury, property damage, emotional trauma and death, and it is my intention for me and my heirs, executors and administrators to waive any and all right and claims for damages I may have against WPY and/or CRINA and any individual associated with WPY and/or CRINA trail rides, trips, events, or tours, their representatives, successors, and assignees, and will hold them harmless for any and all injuries, mishaps and loss of property suffered in connection with my participation in any WPY/CRINA ride, trip, event, or tour. I have been advised that I must be in good health to participate in WPY/CRINA trail rides, trips, events, or tours. I also give permission for the free use of my name, likeness, picture and any opinion expressed by me in any advertisement, newsletter, broadcast, telecast or print media account of WPY/CRINA trail rides, trips, events, or tours, without any compensation to me whatsoever. I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT BY SIGNING IT I HAVE GIVEN UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE AND/OR THE SIGNATURE OF MY PARENT/GUARDIAN IF I AM A MINOR AT THE TIME OF THIS REGISTRATION, TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Participant's Signature _____ Date _____

Printed Name of Participant _____

Signature of Guardian of Participant Under 18 _____

Printed Name of Guardian _____ Date _____

Please note:

No stallions.

No mares with foals.

No dogs on the trail.

Mail to:

Wild Pink Yonder Charitable Society

Box 97

Lamont AB T0B 2R0

Or scan and e-transfer to:

Jane@WildPinkYonder.com