



NEW YORK STATE HORSE COUNCIL 50th ANNUAL FALL PLEASURE RIDE

BROOKFIELD, NEW YORK, OCTOBER 5th THRU 8th, 2018

You may Register Online @ www.rsvpbook.com/NYSHCFallRide18

REGISTRATION FORM

Office Use Only: REG # _____
Date received: ____/____/2018
Confirmation Sent: ____/____/2018
E-Mail: ____ Other: ____
Confirmation will be sent to E-Mail provided. If you do not have email, write Postal Mail Confirmation in the E-Mail box. If you do not receive a confirmation before deadline date, please call Kristin @ 518-788-7469.

REGISTRATION: Two Adults (18&up) and Children (17&under) per Registration Form. Children age 12 and under are free, but must be listed on this form. Registration postal mail receipt deadline date is 9/20/18. After this date, we cannot guarantee availability. Current Rabies and Coggins CERTIFICATE for each horse, MUST be presented at registration on day of arrival. Also, a current Rabies Certificate for each dog (*Dogs need to remain on leash at all times. Dog who may bark are to be managed appropriately to remain quiet*). **CANCELLATION POLICY:** You must contact Kristin Bennett either by phone or written notice no later than 9/9/2018. Cancellation Fee of \$15.00 for each Rider and \$5.00 for each Non-Rider (not applicable to children age 12 & under) will be deducted from your total registration fee. Absolutely No refunds will be given after 9/21/2018.

1. Last Name: _____	First Name: _____		
2. Last Name: _____	First Name: _____		
Children's Name and Age: (under 18 yrs of age): _____			
Home Address: _____			
City: _____	State: _____	Zip: _____	E-Mail: _____
Home Phone #: _____	Cell Phone: _____		

ENTRY FEE: ONE or TWO ADULTS and CHILDREN (under 18 yrs of age) per registration form	Entry Fee	\$ each row ↓
NYSHC MEMBER DISCOUNT ID # _____ REQUIRED (Individual, Family, Life <u>Circle One</u>) Fee - \$20.00 per person Your ID is on your Membership Card. If you don't know it, please E-mail request via Membership@nyshc.org for you ID#.	_____ x \$20.00 =	\$ _____
Non-Member Fee - \$40.00 per person	_____ x \$40.00 =	\$ _____
Non-Member, Non Rider Fee - \$10.00 per person <i>Not riding, visiting, participating, volunteering, you still need to be accounted for</i>	_____ x \$10.00 =	\$ _____
* What date will you arrive? ____/____/2018 What time will you arrive? _____ AM _____ PM	TOTAL \$ ENTRY:	\$ _____

STABLING FEE: <i>Bring your own hay, sawdust is provided. Stall limit per registrant</i>	Stall Fee	\$ each row ↓
Box Stall in Barn #1 & Barn #2 for Fri/Sat/Sunday - \$40.00 per box stall	_____ x \$40.00 =	\$ _____
Box Stall in Barn #3 for Fri/Sat/Sunday - \$30.00 per box stall	_____ x \$30.00 =	\$ _____
* I would like to be stabled next to Person: _____	TOTAL \$ STABLING:	\$ _____

HOOKUP FEES: <i>Camping included. Hookup Fees extra.</i>	Fri ↓	Sat ↓	Sun ↓	Hookup Fee	\$ each row ↓
Electric Hookup Fee per Camper / RV - \$15.00 per night				_____ x \$15.00 =	\$ _____
Sewage Hookup / Dumping Fee per Camper/ RV - \$10.00 per night				_____ x \$10.00 =	\$ _____
TOTAL \$ HOOKUP:					\$ _____

***No outside food/beverage may be brought into the Dining Hall due to NYS Health Regulations**

MEAL FEES: <i>(All meals are served and/or picked up @ Whitford Dining Hall)</i>	Fri ↓	Sat ↓	Sun ↓	Mon ↓	Meal Fee	\$ each row ↓
Breakfast served 7-10am - \$10.00 per person					_____ x \$10.00 =	\$ _____
Bag Lunch pick up between 7-10am - \$10.00 per person					_____ x \$10.00 =	\$ _____
Friday Fish Fry or Lasagna <u>Circle One</u> served @6pm - \$17.00 per person					_____ x \$17.00 =	\$ _____
Saturday Ham & Turkey Dinner served @6pm - \$17.00 per person					_____ x \$17.00 =	\$ _____
Sunday Chicken Barbecue Dinner served @6pm - \$17.00 per person					_____ x \$17.00 =	\$ _____
TOTAL \$ MEALS:						\$ _____

Check # or Money Order # _____ (Payable to NYSHC)	TOTAL \$ ENCLOSED:	\$ _____
TOTAL # ENTRIES REGISTERED:		# _____

I HEREBY enter the New York State Pleasure Trail Ride, sponsored by the New York State Horse Council in cooperation with the New York State Depart. Of Environmental Conservation, at my own risk, and agree to be subject to all the rules and regulations of the Pleasure Trail Ride, the NYSHC, DEC, and the Madison County Fairgrounds and Committee. I further agree that in the event of any damage to occasioned or loss incurred to any horses(s) entered, or to any vehicle or any article, I may send with said horse(s), that I will make no claim against the New York State Pleasure Trail Ride, the Committee, or aforesaid organizations. I further agree to indemnify and to hold harmless the aforementioned for any and all claims, demands, suits and expenses arising out of any injury to any person or damage to any property caused by my horses(s), family, attendant(s), agent, or myself, and I agree to pay ALL liquidation fees for animals which I bring to the Ride that are suffering from contagious or infectious disease. **NYS LAW REQUIRES all riders under age 18 to wear ASTM/SEI safety helmets. NYSHC RECOMMENDS ALL RIDERS WEAR HELMETS.**

Registrants Signature: _____	Signature Date: ____/____/2018
Signature of Guardian (under 18 yrs of age): _____	Signature Date: ____/____/2018
In case of emergency please contact: _____	Phone/Cell: _____

I'VE ENCLOSED the following
 _____ Original or Copy of this Registration Form
 _____ Check or Money Order
PLEASE CALL or EMAIL if you are planning to come Thursday
 Thursday Fee: Stall \$10, Hookup \$15, Sewage \$10

Mail Registration to:
 Kristin Bennett
 NYSHC Brookfield Registration
 56 Lakeshore Drive
 Averill Park, NY 12018

Registration Questions or Inquiries:
 Kristin Bennett
 (518)788-7469
fallride@nyshc.org



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