



NYSHC 48th Annual Fall Pleasure Trail Ride, Brookfield, NY
October 7, 2016 (Friday) thru October 10, 2016 (Monday)
Registration Form

Updated 9/27/16 & 8/10/16

Please fill out ONE Registration Form PER person. \$15.00 Cancellation Fee prior to Sept. 1st or \$35.00 Cancellation Fee w/limited refund after Sept. 1st

ENTRY DATE:
FIRST & LAST NAME:
HOME ADDRESS:
CITY: STATE: ZIP:
HOME TELEPHONE #: ()
CELL PHONE #: ()
E-MAIL:
Office Use Only: Date Rec'd ___/___/2016 PM / EM
Confirmation Postal Mail ___/___/16 E-Mail ___/___/16
Barn # ___ Stall # ___
Barn # ___ Stall # ___
Barn # ___ Stall # ___
Barn # ___ Stall # ___
Notes/Comments:

Table with 3 columns: Entry Fee, \$ or n/a each row. Rows include NYSHC Member (\$15.00), Non-Member (\$35.00), and Non-Rider or Guest (\$10.00).

What day and time will you arrive? TOTAL \$ ENTRY:

Table with 4 columns: # Stalls, Stall Fee, \$ or n/a each row. Rows include Box Stall in Barn #1 & Barn #2 (\$35.00) and Box Stall in Barn #3 (\$25.00).

I would like to be stabled next to? TOTAL \$ STABLING:

Table with 7 columns: Hookup Fee, \$ or n/a each row. Rows include Electric Hookup Fee (\$15.00) and Sewage Hookup/Dumping Fee (\$10.00).

Meals purchased at the door will cost \$2.00 extra. No outside food / beverage may be brought into the Dining Hall due to NYS Health Regulations

Table with 7 columns: Meal Fee, \$ or n/a each row. Rows include Sat, Sun, Mon Breakfast (\$9.00), Sat, Sun, Mon Bag Lunch (\$9.00), Friday Fish Fry or Lasagna (\$16.00), Saturday Ham & Turkey Dinner (\$16.00), and Sunday Chicken Barbecue Dinner (\$16.00).

PAYMENT: PAYPAL Confirmation #: Date Submitted: ___/___/16.
Cash, Money Order #: Check #: Payable to NYSHC
TOTAL \$ MEALS:
TOTAL \$ PAYMENT:

I HEREBY (please provide your signature below) 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 TO WEAR HELMETS. Dogs must be on a leash at all times and require current Rabies Certificate

Registrants Signature:
Signature of Guardian (if under 18):
Emergency Contact Name:
Home Phone #: Cell #:

Enclosed are the following (please check)
___ NYSHC Registration Form per person
___ 2016 Rabies Certificate (per horse, per dog)
___ 2015 - 2016 dated Coggins Certificate (per horse)
___ circle one PAYPAL, Cash, Money Order, Check (\$15.00 penalty for returned checks)
Please mail Registration Form to:
Karen Wheeler, Fall Pleasure Ride Program Mgr.
394 Snake Hill Road, Poestenkill, NY 12140
Any Questions or inquiries please call or e-mail
(518) 328-6172 or Kwheele6@nycap.rr.com
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