

2010 National Finals Ski-Joring Registration

RIDER INFORMATION

Name

Address

City State Zip

Phone Age

Parent or Guardian Signature (If under 18 years of age)

Email SS # (no checks without SS#)

Horse Name

Check if first time entrant Check if change of address

SKIER INFORMATION

Name

Address

City State Zip

Phone Age

Parent or Guardian Signature (If under 18 years of age)

Email SS # (no checks without SS#)

Check if first time entrant Check if change of address

TEAM INFORMATION

TEAM NUMBER _____ **SPONSOR** (Limit One) _____

DIVISION **OPEN** - \$125.00 per team (18 and over) **WOMENS** - \$75.00 per team (18 and over) **JUNIOR** - \$25.00 per team (ages 13-17)

SPORT - \$100.00 per team (18 and over) **LONGEST JUMP** - \$50.00 per team (18 and over) **PEE-WEE** - Free (12 and under)

— WAIVER AND RELEASE —

By signing and initialing this waiver and release form for the National Finals Ski-Joring Event to be held March 13-14, 2010 at Red Lodge Montana, Rodeo Grounds, PARTICIPANT (undersigned participant or undersigned parent or guardian) agrees and fully understands the following: (please initial where indicated)

Initial Here I fully understand that engaging in the sport of ski-joring is a dangerous and unpredictable activity, which could result in personal injury and/or death.

Initial Here I verify that I am physically fit and have trained to participate in this event. I agree that all decisions I make and actions I take are my own. I further agree that I will pay for any and all medical expenses, which may occur as a result of injury to myself by participating in this event.

Initial Here I understand that horseback riding, racing and skiing behind a horse will expose me to above normal health risks. I agree to assume and accept the dangers that occur in the activity of horseback riding, skiing, racing and/or skiing behind a horse.

Initial Here I waive and release for myself, my heirs, executors and administrators all rights or claims for damage which I may have now or in the future against the Red Lodge Ski-Joring Association, Board Members, Sponsors, Land Owners, Race Directors, Volunteers, Spectators, Municipalities, States, any and all City, County and State Agency's, Partners, Employees, Servants and Volunteers from all claims for personal injuries, including death, and damages to property, real or personal, caused by or arising out of my involvement in this event.

Initial Here I fully understand I am responsible for the health and safety of the horse. I waive and release all rights or claims in case of injury and/or death of the horse. I also understand I am fully responsible for any expenses incurred if the horse is injured or for any actions the horse may take causing injury or damage to humans, livestock or property.

Initial Here I agree to allow Red Lodge Ski-Joring Association Officials, Race Organizers and Media representatives the use of my name, photos, video tapes, comments or commentaries to help publicize and promote Red Lodge Ski-Joring Association and the sport of Ski-Joring.

Initial Here Sportsmanship is required from all participants at this event. Ski-Joring Officials, field flaggers, and all race officials have the power to give out warnings or disqualify any person or team that they deem is acting in an unsportsmanlike manner. Mistreating any horse, inappropriate language towards officials, spectators or other competitors and throwing or mistreatment of equipment shall be grounds for disqualification. If you are disqualified you will surrender your entry fee(s). Every participant and team shall act in a sportsmanlike, reasonable and professional manner.

Rider (Parent or Guardian if under 18 years of age) Date

Skier (Parent or Guardian if under 18 years of age) Date

Please complete and mail with your payment BEFORE 03/08/10:

Red Lodge Ski-Joring Association
P.O. Box 1704 • Red Lodge, Montana 59068

In order for the registration to be valid, the above form must be filled out in its entirety, both skier and rider must sign and total amount must be paid. Please provide a valid phone number in case we need to contact you prior to the race.

FOR OFFICE USE ONLY

Amount Paid: _____ Cash Check _____

Saturday Time: _____

Placement: _____