**TRAPPING CREEK COMPETITIVE TRAIL RIDE**

 **Trapping Creek FSR, Carmi. LEVEL1, 15 MILES**

 **Level 2, 24 miles 9 or 6 mile intro rides Aug. 19/20**

Sanctioned by Endurance Riders of B.C. **ERABC.com**. HELMUTS& HCBC MANDATORY

**Ride Manager & Secretary: Myrna- Thompson: 250-317-8347.**

 [**equiessence@hotmail.com**](%20equiessence%40hotmail.com)

 this ride is capped at 30 entries. There will be a waiting list in case of rider cancellations.

 Deadline for entries Aug. 17th. No refunds unless ride is cancelled. No exceptions,

 All CTR rules apply. Competitors must be familiar with the CTR Rule Book found at: <erabc.com>

 Pre-Vetting will start approx. 2:30. Upon arrival, you will be provided with a “time” to vet in. Riders must be prepared to camp Friday night with their horses, except Intro riders.

**Name of Rider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ERABC Member? Yes ( ) No ( ) #**\_\_\_\_\_\_\_\_\_ **HCBC** # **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is this your first CTR? Yes ( ) No ( ) Rider Birth year**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Horse’s full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Breed: \_\_\_\_\_\_\_\_\_\_\_ Registration #:\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Horse’s age: \_\_\_\_\_\_** **Color: \_\_\_\_\_\_\_ Sex: mare ( ) gelding ( ) stallion ( )**

**Weight divisions**- rider’s weight plus tack. Weigh-in for riders at the Ride Office on Friday.

 ***Junior (17 yrs. of age or under as of January 1st.2022)***

 ***Lightweight: between 140 to 179 lbs.***

 ***Heavyweight: over 180 lbs.***

***Junior (age****: \_\_\_\_\_****) Lightweight ( ) Heavyweight ( )***

 ***◦Level 1 ( ) approx. 15 miles Level 2, 24 miles.***

▪Person you would like to ride with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*▪*Junior riders 17 years or under must be accompanied by an adult supervisor who is entered in the competition. Name of adult supervisor

***Entry Fees:***

**ERABC member: Senior $75.00 ( ) Non- ERABC Member: Senior $80.00 ( )**

**ERABC member: Junior $50.00 ( ) Non-ERABC Member: Junior $55.00 ( )**

***FUN RIDE $40.00 ( )***

 *E- Transfers only. Note: funds will automatically deposit.*

**TOTAL for Entry Fees: $:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Scan entry form and signed waiver to:*** ***equiessence@hotmail.com***

***LEVEL ONE ( ) LEVEL TWO ( ) INTRO ( )***

***address. HELMUTS &HCBC MANDATORY***

***MUST receive the signed waiver,e transfer &entry form by Aug/ 17th.***

**CODE OF CONDUCT- HORSE/RIDER/HANDLER ERABC RIDE SITES**

AT ALL TIMES I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand that while participating in a ERABC sanctioned ride,

I will be responsible for my behavior towards other persons and will be responsible for the actions and behavior of my horse at

the Ride Site and on the roads and trails. I understand that this responsibility starts at the time I enter the Ride site, until the time

I leave the Ride Site to go home. I pledge that I will not bring a horse to the Ride site knowing that this horse has behavioral

Problems dangerous to people and other horses. I pledge that I will behave in a manner becoming a sportsperson and that I will

be considerate in my attitude towards other people and other horses. I understand that these commitments are made for the safety

of all parties involved, people and horses alike, and I understand that by signing my name to this document, I agree to these

pledges and commitments. This Code of Conduct is agreed to by:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RIDE RELEASE WAIVER**

**To Myrna Thompson and all the organizers of the Trapping Creek CTR, and representatives, agents, officials, volunteers,**

**business operators, and site property owners, (all of them collectively called the HOST).**

**I am aware and understand that there are Inherent DANGERS, HAZARDS, and RISKS, (collectively called RISKS)**

**Associated with Equine Activities. I acknowledge that these Inherent “RISKS” of Equine Activities mean those**

**DANGEROUS conditions which are an integral part of Equine Activities, including but not limited to:**

**1). The property of any equine to behave in ways that may result in injury, harm or death to persons on or around**

**them and/or damage to property in their vicinity.**

**2). The unpredictability of an equine’s reaction to such things as sounds, sudden movement and unfamiliar objects,**

**Persons or other animals.**

**3). The equine’s response to certain hazards such as surface and subsurface objects.**

**4). Collisions with other equines, animals, people, and objects;**

**5). The potential of any participant to act in a negligent manner that may contribute to injury to the participant or**

**others, such as failing to maintain control over the equine or to act within his or her ability.**

**I understand that injuries resulting from such “RISKS” are a common and ordinary occurrence associated with Equine**

**Activities. In consideration of the “HOST” permitting my Participation in the “ACTIVITY”, I together with my heirs,**

**executors, administrators and assigns, (collectively called my “Legal Representatives”) agree as follows:**

**1). To Waive All Claims that I may have against the “HOST”; and,**

**2). To Release the “HOST” from Any and All Liability for any loss, damages, injury, or expense that I or my “Legal**

**Representatives” may suffer as a result of my Participation in the “ACTIVITY” due to any cause what-so-ever**

**INCLUDING NEGLIGENCE ON THE PART OF THE “HOST”, and,**

**3). TO HOLD HARMLESS AND INDEMNIFY the “HOST” from any and all liability for any property damage or**

**personal injury to any third party resulting from my Participation in the “ACTIVITY”.**

**I have read and understand the Rules of the “ACTIVITY” which apply to me. I agree to abide by those Rules and**

**Acknowledge that a breach of the Rules may among other things result in my expulsion from the “ACTIVITY”. Before I**

**signed this Release and Acknowledgement, I read it and I state that I understand it. I am aware that by signing this**

**Release and Acknowledgement, I am waiving certain legal rights which I might have against the “HOST”, or if I die, by**

**signing this Release and Acknowledgement, I am against the “HOST”.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**

**If the Participant is a Minor (Under 19 Years of Age at Date of Signing) I am the legal guardian of the Participant named**

**herein and am executing this Release and Acknowledgement on behalf of the Participant in my capacity as guardian and**

**with the intent that this Release and Acknowledgement be binding on the infant Participation for all legal purposes.**

**Before I signed this Release and Acknowledgement, I read it and I state that I understand it. I am aware that by signing**

**this Release and Acknowledgement, I am waiving certain legal rights which I might have against the “HOST”, and which**

**the infant Participant has against the “HOST”. In the event of my death or the death of the Infant Participant, by signing**

**this Release and Acknowledgement, I am waiving all legal rights which my Legal Representatives or the Legal**

**Representatives of the infant Participant may have against the “HOST”, waiving certain rights that my Legal**

**Representatives may have against the “HOST”.**

Name of legal guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_