



Whiskey Road Foxhounds

Celebration Hunter Pace Series

REGISTRATION FORM

Division: _____ First Flight _____ Hill Topper

Entry Fee: \$60/rider (**Entry includes lunch if received by Wednesday prior to event)

Rider #1

Name _____ Phone: _____/_____
email: _____

Rider #2

Name _____ Phone: _____/_____
email: _____

Rider #3

Name _____ Phone: _____/_____
email: _____

Rider #4

Name _____ Phone: _____/_____
email: _____

Total # Riders: _____ Total Fees Due: \$ _____

INDEMNITY AND RELEASE OF LIABILITY

I request permission to participate in cross-country riding and foxhunting with the Whiskey Road Foxhounds. I fully understand that cross-country horseback riding and foxhunting (which includes riding over fences, other obstacles and dangerous and rough terrain) are dangerous activities and I accept and assume all the risks of injury (including death) to me or my property. In exchange for being permitted to participate in these activities, for myself, my heirs guardians, and legal representatives, I release and agree not to make or bring any claim against Whiskey Road Foxhounds, its Masters, officers, directors, members, employees, guests, or any landowners, landholders or other persons making property available for Whiskey Road Foxhounds, for injury (including death) to me or any damage to my property arising out of my participation in these dangerous horseback riding, foxhunting or related activities; and I also agree if anyone makes any claims because of any injury to me (including death) or for any damage to my property, I will keep all those released by this agreement free of any damages or costs because of those claims.

Participant (Print Name) _____

Signature: _____ Date: _____/_____/_____