



Idaho Mounted Orienteering

"The Thinking Sport"

RIDE NAME _____

TEAM NAME _____

DATE _____

TEAM RIDERS (name)	STEED (name)	(breed)	(sex)	(age)
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

[First] [Ride] GUEST RIDERS (name & address)	STEED (name)	(breed)	(sex)	(age)
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[] _____	_____	_____	_____	_____
[] _____	_____	_____	_____	_____
[] _____	_____	_____	_____	_____
[] _____	_____	_____	_____	_____

I hereby enter the above named horse and myself as rider, subject to all rules and regulations of this ride as posted by the ride management. I further understand and agree that I will not hold anyone (ride management, land owners, participants, etc.) in any way responsible or liable, nor will I make claim against them for damages, injuries, accidents, losses, or otherwise that may be incurred in affiliation with this ride.

RIDERS SIGNATURES

Riders under the age of 18 must have a parent or guardian sign consent of participation and agreement of the above liability release.

PARENT OR GUARDIAN SIGNATURE _____