

# TRAIL RIDE REGISTRATION AND RELEASE



- MEMBER
- NON-MEMBER
- CHANGE OF ADDRESS

\*Child is anyone ages 7-11  
 \*\*Children under 7 are Free but must be listed

OFFICE USE ONLY

\_\_\_\_ PARTICIPANT (12+) \$ \_\_\_\_\_  
 \_\_\_\_ CHILD (7-11) \$ \_\_\_\_\_

*Ride Registration Total:* \$ \_\_\_\_\_

NAME: \_\_\_\_\_  12+  Child

NAME: \_\_\_\_\_  12+  Child

NAME: \_\_\_\_\_  12+  Child

NAME: \_\_\_\_\_  12+  Child

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_

Membership Dues: \_\_\_\_\_

Donation: \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL AMT DUE** \$ \_\_\_\_\_

PD: \_\_\_\_\_

Please add my name to the emailing list - Email: \_\_\_\_\_

I prefer to receive flyers & correspondence via USPS

**EMERGENCY CONTACT** NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**NEGATIVE COGGINS REQUIRED**

Horse Name	Lab Name	Date Reported	Accession #

**IN CONSIDERATION OF MY ACCEPTANCE TO PARTICIPATE IN THE ALAMO COUNTRY KICKERS, INC. TRAIL RIDE, (AKK) I HEREBY RELEASE AKK TRAIL RIDE, ALL ORGANIZATIONS, LANDOWNERS AND INDIVIDUALS RIDING OR ASSISTING ON THE RIDE OR IT'S ACTIVITY, THEIR OFFICERS, AGENTS, SERVANTS AND EMPLOYEES, FROM ANY AND ALL CLAIMS FOR DAMAGE OF ANY KIND OR CHARACTER FOR PERSONAL OR BODILY INJURY TO ME, FOR INJURY OR DAMAGE TO MY LIVESTOCK AND EQUIPMENT, AND I HEREBY ASSUME ALL RISK INVOLVED IN ANY ACTIVITY IN WHICH I PARTICIPATE OR THAT MAY BE SPONSORED OR APPROVED BY ANY OF THE ABOVE NAMED ORGANIZATIONS AND INDIVIDUALS.**

**THIS RELEASE SHALL BE BINDING UPON ME AND ALL OTHERS FOR WHOM I AM REPRESENTING AND RESPONSIBLE FOR, AND I HEREBY INDEMNIFY THE ABOVE-NAMED ORGANIZATION AND INDIVIDUALS AGAINST THE CLAIMS OF ALL PERSONS FOR WHICH I AM RESPONSIBLE ON THE TRAIL RIDES OR OTHER ACTIVITIES CONDUCTED BY SAID ORGANIZATIONS AND INDIVIDUALS. I AGREE TO ABIDE BY ALL BY-LAWS; RULES AND REGULATIONS OF THE ALAMO COUNTRY KICKERS, INC. INCLUDING ORDERS OF THE TRAIL RIDE OFFICIALS DURING THE COMPLETE RIDE.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE) AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISK OF EQUINE ACTIVITIES.**