

BONITA LAKES 25/50

INTRO BOTH DAYS

MAY 18 & 19, 2018

Where: Lauderdale County Ag Center, 1022 MS 19, Meridian, MS 39301

When: We will begin check-in & any late registrations at 1pm on Thursday, May 17, 2018 and vet-in can begin at or about that time; depending on DVM's arrival and set up.

About: Bonita Lakes trail has various terrain; mostly hills up and down single track through wooded and winding trail; although, some is flat & well defined trail. Depending on recent rainfall, there will be water on Backwater Trail. **Camping and parking will be in the Ag Center parking lot and there are over 50** electrical sites, available at the AG center. There is water for horses and humans. The Ag center has showers and restrooms. There will be plenty of parking space. There is no parking fee. However, you will probably need to stall your horses. The parking lot will not be useful for temporary stalls nor hi-ties. Stalls have been reserved in bulk – **but to reserve and pay contact the AG Center and note AERC – Bonita Lakes Endurance Ride. To reserve electrical sites and stalls call Phone: (601) 482-8498**

Awards: Completion awards will be given to all those who complete their chosen course. Top 10, Best Condition, First Time Riders and Weight Division Winners will be recognized. 1st place junior rider in each distance will be awarded. All junior riders will be recognized. Turtle Award.

Food: We'll have it. *Lagniappe!*

Thursday, May 17, 2018. 6:30 PM - Ride meeting

**Friday, May 18, 2018 50's – 7AM
 25's – 7:30AM
 Intro – 9AM
 6 PM - Dinner
 6:30 PM - Meeting/Awards**

**Saturday, May 19, 2018 – 6 PM – Dinner
 6:30PM Awards**

Photographer: We will have a ride photographer. TBD

Vet Checks: All checks will be in camp.

Any proceeds beyond expenses will be donated to the Leukemia and Lymphoma Society www.lls.org in honor of Dr. Donald L. Middleton (my father).

Rider Name _____ AERC# _____

Rider Address _____ Cell Phone: _____

FW (up to 160 #) ___ LW (161 to 185 #) ___ MW (186 to 210 #) ___ HW (211#+) ___ Junior _____

Emergency Contact _____ Phone: _____

Emergency Contact (2) _____ Phone: _____

Horse (1) Name _____ Horse (1) AERC# _____

Breed _____ Age _____ Color _____

Negative Coggins Collection Date: _____ Accession # _____

Horse (2) Name _____ Horse (2) AERC# _____

Breed _____ Age _____ Color _____

Negative Coggins Collection Date: _____ Accession # _____

Ride Fees:	May 18 (Friday)	May 19 (Saturday)	Totals
Intro: \$75			
25 Mile – Limited \$125			
50 Mile: \$135			
AERC Day Membership Fee*: \$15			
Parking – Free 😊 You're welcome			
Discount early birds \$25 for entries postmarked no later than 4/30/2018 Less: \$5 TERA M# _____			
Total Due:			
			-

\$50 Non-refundable deposit required with entry form. Thank you.

*Day member fee is assessed for non AERC members to have a 1 day membership to participate in AERC event. Does not apply to Intro Riders.

We will provide food while supplies last at no additional charge – lagniappe.

If by mail make checks to: **Silver Lining Stables**

*Attn: Bonita Lakes
120 West Harper St.
Richland, MS 39218*

You can scan the entry forms and pay online: amiddletn@gmail.com

If you would like to pay via CC online, we can send you an invoice to your email upon receipt of your entry and signed waiver.

It will make everything go more smoothly and we can prepare much more efficiently, if we know you're coming. Shoot us an email, please!

Bonita Lakes

Waiver of Liability - Statement of Rider

I wish to enter and participate in the Bonita Lakes to be held Friday and Saturday, May 18 & 19, 2018. I have read the rules, conditions, and regulations of the event and will comply with them. As a participant in the Bonita Lakes, I agree to abide by the rules of all applicable sanctioning organizations, including American Endurance Riders Conference, Southeast Endurance Riders Association, Texas Endurance Riders Association, Southeast Distance Riders Association and the aforementioned ride.

I hereby knowingly execute this waiver of the right to sue and do hereby agree to assume all risks associated with participation in the ride. I agree that my participation in the event involves certain risks, which include but are not limited to, the following: 1) horseback riding involves being in remote areas for extended periods of time, far from communications, transportation, and medical facilities; that these areas can have many natural and man-made hazard which ride management cannot anticipate, identify, modify or eliminate, these hazardous surface / sub-surface conditions including such things as rocks, trees, puddles, streams, fences, jumps, and / or other hard objects and / or holes, divots, ledges which could cause and equine to trip and / or fall and / or strike a participant who falls from or is thrown from and equine; 2) that horses can behave in unpredictable ways which can result in accidents to anyone at any time, resulting in injury, sever injury, or death; 3) that an equine's reactions to sound, movements, objects, vehicles, persons, animals, scents, or insects cannot be predicted.

I agree to take full responsibility for myself / my child, and the animal I/my child am/is riding. I will hold harmless the AERC, SERA, TERA, & SEDRA, their officers and all individual members thereof, all ride personnel and any of its affiliates and any owner whose property this ride my cross, their successors, representatives, and assigns for any accident, injury, loss that might occur due to my participation in this ride, and free from all liability for such injury or loss, including that due to negligence not caused by willful misconduct of ride personnel. I further agree that should a claim of any nature arise under this agreement, said claim shall be submitted to binding arbitration before a neutral arbitrator mutually selected by all parties involved. Venue and law shall be governed by the location of loss incident claim.

This release extends to ANY and ALL claims of every kind and nature whatsoever, whether known or unknown, and I expressly waive any benefits that I may otherwise have under provisions of the law of the State of Mississippi relating to the release of known claims. I understand that this release constitutes a limitation on my legal rights.

Under Mississippi law, an equine activity sponsor or equine professional is not liable for an injury or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. (Code of Mississippi Act 443)

I hereby certify that my horse is not under the influence of medication and will not be treated with or given any medications prohibited by AERC rules. The undersigned verifies acceptance of risks and responsibilities for rider's and horse's conditions and certifies that all information on this form is correct to the best of his / her knowledge.

THIS AGREEMENT IS BINDING UPON ME, MY SPOUSE, LEGAL REPRESENTATIVES, HEIRS, EXECUTORS AND ASSIGNS. I HAVE READ THE ABOVE, UNDERSTAND IT, AND AGREE TO ABIDE BY THIS.

Date: _____ Rider's Signature _____

Parent or Guardian Signature- if Junior Rider: _____

Horse Owner's Signature _____

Horse Owner's Name: _____

Junior Rider Consent: I accept all AERC / TERA / SERA / SEDRA / AHA rules that apply to my entry and recognize the ability of this Junior to substitute a sponsor during the ride as allowed and, in my absence, consent to emergency medical treatment or aid to said Junior rider.

Name of Junior: _____

Signed (Parent / Guardian) _____

Printed Name of Parent / Guardian _____ Date: _____