

2022 REGISTRATION FORM - ALL EQUINE ARE SUBJECT TO APPROVAL BY THE EQUINE WELFARE COMMITTEE AT ANY TIME DURING THE RIDE.
 PLEASE TYPE OR PRINT

ONLY ONE APPLICANT PER FORM

PLEASE TYPE OR PRINT

NAME _____

ADDRESS _____

CITY _____

STATE / ZIP _____

HOME PHONE (____) _____

WORK PHONE (____) _____

E-MAIL _____

BIRTHDATE _____

MAKE CHECKS PAYABLE TO:
 SOUTH TEXAS TRAIL RIDERS, INC.
 459 CR 311, FLORESVILLE, TX 78114
 VICKI GANNAWAY - MEMBERSHIP CHAIRMAN (210) 378-4846

____ Number of vehicles in your party.
 RIDER NON-RIDER WAGON DRIVER WAGON RIDER

WEEKLY RATE (INCLUDES MEMBERSHIP)

ADULT (18 yrs. and over)	\$60.00	\$ _____
MINOR (6 yrs. to 17 yrs.)	\$20.00	\$ _____
CHILD (5 yrs. and under) application required	- 0 -	\$ FREE
LATE FEE after Jan 15, 2022	\$10.00	\$ _____

S.T.T.R. SCHOLARSHIP DONATION \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

ACCESSIONS # _____

*** EVERY EQUINE MUST HAVE A NEGATIVE COGGINS TEST.**

RELEASE

For and in consideration of the privilege of participating in and as a condition for membership in the 2022 South Texas Trail Riders, Inc., I hereby assume all risk of personal injury or damage to me, property and my livestock, and I hereby release the San Antonio Livestock Show & Rodeo Association, the South Texas Trail Riders, Inc. and any other organization or individual in charge or connected with the San Antonio Livestock Show & Rodeo Association, the South Texas Trail Riders, Inc., from all claims. And/or liability from any accident, injury, damage or loss incurred or suffered by me or anyone in my charge or care no matter what the nature or cause and I further agree to indemnify and hold harmless the San Antonio Livestock Show & Rodeo Association, the South Texas Trail Riders, Inc. from any and all damages, costs, charges, expenses, legal fees or any other loss or expense incurred by said organization or the individuals connected thereto resulting from any accident, injury, damage or loss incurred or suffered by any third party resulting from any acts or actions on my part in or by anyone in my charge, whether such acts were intentional, accidental or negligent which caused or contributed to the cause of such accident, injury, damage or loss incurred or suffered by such third party. I do hereby certify that I have read the foregoing and agree to same and further agree to abide by the rules and regulations of the South Texas Trail Riders, Inc., and state that I am qualified for membership therein.

NAME (PRINT) _____ SIGNED _____ DATE _____

PARENTS PERMISSION FORM

APPLICANTS UNDER 18 YEARS OF AGE MUST HAVE A SPONSOR OR PARENT TO RIDE WITH THEM AND APPLICATION MUST BE SIGNED BY PARENT OR GUARDIAN.

AGE (AS OF JANUARY 1 2022) _____ DATE OF BIRTH _____
PARENT'S OR GUARDIAN'S NAMES _____ PHONE (____) _____
SPONSOR'S NAME (PRINT) _____ PHONE (____) _____
SIGNED _____ PHONE (____) _____