PARTICIPATION AND PAYMENT INFORMATION TRADE WINDS FARM I REXFORD, NY I OCALA, FL



Agatha and the rest of Trade Winds Farm look forward to welcoming you to visit the farm and participate in this clinic with Diane Carney! Please complete and submit the information below.

Please fill out a form for each horse/rider combination.

PARTICIPANT INFORMATION	N		
NAME			
ADDRESS			
		ATEZIP	
PHONE	EMAIL		
RIDER OVER 18 YEARS OF AGE (Y/N) BARN AFFILIATION			
TRAINER PHONE			
EMERGENCY CONTACT NAM	E		
EMERGENCY CONTACT PHON	NE AR	RIVAL DATE	
Would you like to receive ema	ils from Trade Winds Farm about fu	uture events? YES NO	
HORSE INFORMATION			
HORSE NAME			
JUMPING HEIGHT CHECK ONE. SESSION LEVEL	— Fences 3'9" to 4' per Equitation	POT CLINIC IN THE MEMOLINE <u>PLEASE MAIL THIS FORM,</u> <u>ALONG WITH YOUR CHECK TO:</u> Trade Winds Farm Attn: Clinics 394 Riverview Road Rexford, NY 12148 <u>STABLING INQUIRIES:</u>	
Full Amount due at time of Registrat April 13th. Refunds will only will be g PAY BEFORE APRIL 13 \$300 AUDITING FEES \$20	tion. Registration discount through given with a vet certiflcate minus \$50. PAY AFTER APRIL 13 \$325 STALL \$50	Todd Smith 518.857.2013 <u>tacllc@yahoo.com</u> <u>QUESTIONS:</u> <u>tradewindfarm@live.com</u>	

HORSE HEALTH AND PARTICIPATION DECLARATION TRADE WINDS FARM I REXFORD, NY I OCALA, FL



Completion of this form is required for participation in the event at Trade Winds Farm.

TRADE WINDS FARM ADDRESS

Trade Winds Farm is located at 394 Riverview Road, Rexford, NY 12148.

PROOF OF VACCINATION AND NEGATIVE COGGINS

Before any horse is to enter any Trade Winds Farm property, proof of the following must be submitted:

- A copy of an up to date negative Coggins
- Proof of Equine Influenza vaccine within 6 months (180 days)

Please send your health papers in with your event registration form.

Please note this form may be signed and submitted the day of the event.

TRADE WINDS FARM RULES

- Please be respectful of Trade Winds Farm and their property during your visit.
- Please follow all posted rules including speed limits and safety protocols.
- Please park in designated parking areas only.
- Trade Winds Farm staff work hard to keep the farm property clean, please follow our example by cleaning up after yourself and your horse.
- Please put all garbage and manure in designated receptacles.
- All riders must wear proper headgear and footwear when mounted.
- Please exercise common sense and behave in a safe manner when interacting with or near animals

HORSE HEALTH DECLARATION

I declare that the horse named above have been in good health, with body temperature below 102°F, eating normally and have shown no signs of infectious disease for the three (3) days preceding arrival at this event.

SIGNATURE OF RIDER	DATE
SIGNATURE OF PARENT/GUARDIAN (if rider is under 18 years of age)	DATE

WAIVER AND RELEASE

I, the undersigned, acknowledge that as a rider/competitor, I am subjecting myself to certain risks or injury or damage to either horse, rider, or equipment. Knowing these facts, I nevertheless, in consideration of your accepting me as a competitor, do hereby for myself, my heirs, executors, and administrators, agree to waive, release and hold harmless Trade Winds Farm, Agatha D'Ambra, their employees, agents, or representatives, paid or unpaid, from any accident, death, injury, damage, or theft that might occur to me, my horses, family, friends, or personal property while at Trade Winds Farm. I have read the above statement and understand my rights.

SIGNATURE OF RIDER _____ DATE _____

SIGNATURE OF PARENT/GUARDIAN ______ DATE ____ DATE ____ (if rider is under 18 years of age)