

Application to Join the Wagon Train

Please fill out one application for each individual on horseback or one application for each wagon.

Children must be 12 years of age in order to ride a horse at this event.

Families with children younger than 12 are encouraged to attend, but they must be in a wagon.

Name _____ Age _____

Address _____
(Apt) (Street Address) (City) (Province) (Postal Code)

Home Phone _(____)_____ Cellular Phone _(____)_____

E-Mail Address _____

Emergency Contact _____ at (phone) _____
(name)

If you are on any medications we should know about, please list them here _____

If you have any allergies, please explain them fully and list any medications used to control them

If you are under 18 years of age, you must have a guardian participating with you & you must wear an approved helmet.

Guardian's Name _____ Phone (____)_____

Guardian's Signature _____

Every effort will be made to accommodate your riding schedule preference, but please note that we can only take 30 riders at any given time. Those wanting to ride for a week (or more) will take precedence over those riding for a day or weekend. Try to arrive the night before you start riding (after supper) since, from time to time, mornings will be early.

First choice: Start date, morning of _____ 2010 End date, evening of _____ 2010

Second choice: Start date, morning of _____ 2010 End date, evening of _____ 2010

For those joining us more than once (say, two weekends but not the week days in between), please indicate that here:

Starting: morning of _____ 2010, ending evening of _____ 2010.

Coming back: morning of _____ 2010, ending evening of _____ 2010.

Coming back again: morning of _____ 2010, ending evening of _____ 2010.

Whoa up, partner!

If you will be riding a saddle horse, please put a check mark here _____ .

If you will be bringing a wagon or cart, please indicate the number of horses _____ ,

the total number of participants* over the age of 12 ___ : names _____

and the total number of children under the age of 12 ___ : names _____

*Daily minimum applies to the wagon, no matter how many people are in the wagon.

For insurance reasons
all participants must be current members of Alberta Equestrian Federation.
Join on line at www.albertaequestrian.com
or phone (403) 253-4411

If you are an AEF member already, please verify your membership number here: _____

Pledge Information

Wild Pink Yonder requires a \$50 registration fee plus \$50 deposit to accompany this mail-in application.

If you would like your own on-line fund-raising page, simply fill out "the form" (with a picture) at this location on the WPY website:
<http://wildpinkyonder.com/Participants.html>

Your minimum contribution must be \$200 for each day that you attend.

The \$200 is per rider on horseback or per wagon, no matter how many are in the wagon.

This can be from pledge money you raise, your personal cheque or a combination of both.

Pledges can be made on-line through your account, via cheque to Wild Pink Yonder Charitable Society, which can be mailed to the WPY office address or by cheque and/or cash delivered when you arrive in camp.

Your \$50 deposit will be returned to you in the form of a cheque on the first day that you ride.

Legal Waiver

This wagon train is arranged by Wild Pink Yonder Charitable Society (WPY). WPY does not assume liability for injury, damage, accidents, loss, delay or irregularity that may be occasioned by reason of defect in any vehicle or for failure to carry out such arrangements as mentioned. WPY reserves the right to modify the schedule as circumstances may require to expedite the trail ride and assure the safety of the trail ride participants, including dismissal of participant(s) exhibiting unruly, abusive or disruptive behaviour and participant(s) with horses WPY deems unsafe/disruptive to have around other horses.

If I have any dietary special needs or issues, I am aware that WPY may not be able to accommodate my needs. Therefore, responsibility for any special dietary needs is entirely my own and WPY will not be held liable for any loss or injury or medical needs, or expenses, arising from the food I voluntarily or accidentally eat on this ride.

I am aware that the activities planned, such as riding horses or driving horses, contain inherent risks of injury, emotional trauma and illness. I recognize that such risks may be present at any time before, during or after the trail ride I am participating in with WPY. I am also aware that adequate medical services or facilities may not be readily available or accessible during some or all of the time and that evacuation, if necessary, can be prolonged, difficult and expensive. In consideration of, and as part payment for the right to participate in, and by registering for this WPY trail ride, events, or tours, I have and do hereby fully assume all risk of injury, property damage, emotional trauma and death, and it is my intention for me and my heirs, executors and administrators to waive any and all right and claims for damages I may have against WPY and any individual associated with WPY trail rides, trips, events, or tours, their representatives, successors, and assignees, and will hold them harmless for any and all injuries, mishaps and loss of property suffered in connection with my participation in any WPY ride, trip, event, or tour. I have been advised that I must be in good health to participate in WPY trail rides, trips, events, or tours, and I also give permission for the free use of my name, likeness, picture and any opinion expressed by me in any advertisement, newsletter, broadcast, telecast or print media account of WPY trail rides, trips, events, or tours, without any compensation to me whatsoever. I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE, BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE AND/OR THE SIGNATURE OF MY PARENT/GUARDIAN IF I AM A MINOR AT THE TIME OF THIS REGISTRATION, TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Participant's Signature _____ Date _____

Printed Name of Participant _____

Signature of Guardian of Participant Under 18 _____

Printed Name of Guardian _____ Date _____

No stallions.
No mares with foals at their sides.
No dogs.

Mail to: **Wild Pink Yonder Charitable Society**
Box 97
Lamont AB T0B 2R0