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CTHA
www.ride-ctha.org



Dedicated to the Future
Of Horses On Trails

CHATTAHOOCHEE TRAIL HORSE ASSOCIATION

Poker Ride

June 8, 2024

Entries received before June 3, 2024 Entry Fee \$35.00 Includes lunch, 1 Poker Card+ 1 Bonus Card + CTHA Token

Entries received after June 3, 2024 Entry Fee is \$40.00 Includes lunch, 1 Poker Card

Additional Poker Cards are available for \$7.00 per hand

Lunch Choices: 1- Hamburger or 1-Cheese Burger or

2-Hot Dogs, 1 Bag Chips, 1-Drink

Additional meals and snacks available
for purchase

Current Negative Coggins Required

Entry Form

Information

_____		_____
<i>Last</i>	<i>First</i>	<i>Date</i>

<i>Street Address</i>		
_____		_____
<i>City</i>	<i>State</i>	<i>ZIP Code</i>
_____		_____
<i>Phone</i>	<i>Email</i>	

<i>Signature</i>		

Mail Forms and Payments to: CTHA P.O. Box 211
Dahlonega, GA 30533 or

Pay by PayPal on the CTHA website WWW.Ride-CTHA.org
Please contact CTHA with questions: ride.ctha@gmail.com or
call Erma McClain 732-423-3903

You will be required to sign a waiver the day of the event.

Waiver Statement & Release of Liability

Chattahoochee Trail Horse Association, United States Forest Service (US Dept Agriculture)

CTHA Poker Ride June 8, 2024

WARNING UNDER GEORGIA LAW, AN EQUINE ACTIVITY SPONSOR OR PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM INHERENT RISKS OF EQUINE , PURSUANT TO CHAPTER 12 OF TITLE 4 OF THE OFFICIAL CODE OF GEORGIA ACTIVITIES

WAIVER & RELEASE STATEMENT- (All participants MUST sign. Minors must have a parent's or guardian's signature, NO EXCEPTIONS): As a participant in this event, I hereby knowingly execute this waiver of the right to sue and agree to assume all risks associated with my presence at this trail ride, including but not limited to the risk of death, bodily injury, property damage, falls, kicks, bites, the unavailability of on-site medical care, Electricity and water, the negligence and/or deliberate act of other persons and consequential damages, which may be incurred by me or my horse or to me and my horse at the event stated above.

In consideration of the acceptance of my entry, the undersigned participant, for myself, my family members, my heirs, administrators, personal, Representatives, successors and assigns hereby fully release, discharge and hold harmless, Chattahoochee Trail Horse Association, Inc. (CTHA), Chattahoochee National Forest/US Forest Service/US Dept. of Agriculture (on whose land I will be riding) and all sponsors, owners and operators of event motor vehicles, and officers, directors, employees, volunteers and lessors of any foregoing persons or entities from any and all liability, whether resulting from negligence or any aspect of the Poker Ride, whether a pre-ride, post ride activity or the ride itself. I also expressly covenant with the aforementioned persons and entities not to sue any such persons and entities for any such activity, including the negligence of any such persons and entities. I certify and represent by my application for entry that my physical condition is adequate to participate safely in the Poker Ride and I hereby acknowledge that the above persons and entities have no obligation to provide medical care and have not undertaken the responsibility to do so. In the event that I receive medical care as a result of a medical emergency, I hereby consent to such care and fully release any person(s) providing such care from any and all liability , whether resulting from negligence or otherwise.

I authorize and consent to persons employed or contracted by CTHA whether by videotape, film, newsprint, written advertisement or otherwise, of any materials containing my name or picture and I release any sponsors and all persons acting under authority from any claims I might have due to initial publication or subsequent of any such materials or photographs. I hereby certify that I have fully read and understand the foregoing release waiver, and covenant not to sue and sign it voluntarily.

It is recommended all riders wear a helmet at all times during any of the equestrian activities.

I agree to assume responsibilities for any risks arising from weather conditions rough terrain, wild animals, automotive vehicles, and other trail users and poisonous/toxic plants and/or animals, insects and other adverse conditions associated with any of the natural environment during this event.

I understand that horses can behave in unpredictable ways which can result in accidents to anyone at any time and that an equine's reaction to sound, movements, objects, vehicles, persons, animals, scents. Or insects cannot be predicted. I assume responsibility for the horse I will be riding, that it will be free of any contagious disease, have a current negative Coggins Test, and not dangerous or unsuitable for this event.

Riders Printed Name- REQUIRED

Riders Signature- REQUIRED

Street Address/ City/ State/ Zip Code

Parent/Guardian Signature (REQUIRED if under 18)

Date

Emergency contact name & phone #- REQUIRED

Coggins Date and #- REQUIRED

OPTIONAL: email for future Jake & Bull communications