



SHOCKALOE I & II – AERC / SERA/ SEDRA / TERA DECEMBER 1 & 2, 2017

Where: Bienville National Forest, Shockaloe Trail, Base Camp 1. The Shockaloe Trail is located on the Bienville National Forest between Forest, MS and Morton, MS just north of U.S. Highway 80. Base Camp I is located ¼ mile north of U.S. Hwy 80 on Forest Service Road 513. On Hwy 80 between Morton, MS and Forest, MS.

From exit 88 on I-20, Forest/Highway 35, take 35 north for 1.8 miles to the town of Forest, then turn left on US 80 west. Travel 5.3 miles on US 80 to turn right on Forest Road 513. Head north on FR 513, immediately crossing railroad tracks. Travel for 0.2 miles, then turn right into Base Camp I. Base Camp II is located approximately 5 miles further north on FR 513.

Trailhead GPS Coordinates: 32.365492, -89.561938 Between Forest, MS and Morton, MS just off Hwy 80 on FR 513.



When: We will begin check-in & any late registrations at 1pm on Thursday, November 30, and vet-in can begin at or about that time.

Thursday, November 30 - Ride Meeting and Dinner 6PM with First Time Riders immediately-following.

Friday, December 1 – Awards / Ride Meeting, Dinner - 6PM with First Time Riders immediately-following.

Saturday, December 2 – Awards, Dinner

About: Shockaloe Trail is flat & well defined trail; mostly wooded. Be prepared to cross small streams and wet areas depending on recent rainfall. The trails are super easy to follow. There are a few road crossings. **Camping:** Port-o-lets. No electrical sites. There is water for horses and humans. Parking space will be tight. With your patience and understanding we will get everyone parked. \$15 per rig to park.

Securing your horse: Horses can be high tied or in temporary fencing in the wooded area. **Each horse owner/custodian is responsible for the safe containment of their horses.** No vehicles will be allowed (per the forestry service) in the wooded areas. They will be ticketing any vehicle that goes into the forest/wooded areas. Even if it looks like a nice easy place to set up – don't do it.

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.

Swag Bags: We have several sponsors who will be providing goodies for your swag bag. First 60 paid in full will receive a SWAG BAG!

Food: All paid entries will be provided 1 meal per day for the days they are participating/paid. If you are vegetarian, vegan, pescatarian, or any other special needs diets...please send me a note to amiddletn@gmail.com

Thursday, November 30, 2017. 6PM - dinner/ride meeting

Friday, December 1, 2017 6 PM -Recognition of Living Legends –
Dinner/Meeting/Awards

Saturday, December 2, 2017 – TBD- Evening Meal / Awards. 100 Mi Awards will be after all riders are in.

The food will be outstanding. And you will not want to miss the Recognition of Living Legends. We will keep it short because we know that folks need to get to bed to be up early.

Photographer: Alan Creel on duty of *Alan Creel Photography*

Please be prepared we will put all pics on a CD and you can purchase the whole weekend from Living Legends, Awards to candid and portraits if you want one and snag Alan to do it for you. You will pic these up at the ride. (\$20)

Ride Fees: Intro: \$75 receives- Completion Award, meals, Vet-in and Out.

LD - \$100 Sanctioning Fees, Completion Award, Other awards, 3 Vet Checks

55 Miles - \$110 – Sanctioning Fees, Completion Award, Other awards, 4 Vet Checks

100 Miles - \$135 – Sanctioning fees, Completion Award, Other Awards, Vet in/out plus 6 checks (minimum) subject to change.

One Day – AERC Member fee (\$15) per day (does not apply to Intro).

2017 AERC membership will be considered current. However, no miles awarded until 2018 membership fees are paid per AERC.

TERA Members – in lieu of Sanctioning fees will receive \$5 application fee.

Vet Checks: Vet-in at Base Camp 1. There will be an away check at Base Camp 2. Final Check at Base Camp 1 for all distances. More detail at the ride meetings.

Cancellations: A portion of your fee is non-refundable – the deposit. The deposit is used for completion awards, meals, permit - Forestry service, upfront parking paid, and numerous other things. Once you vet-in – there are no refunds. If you arrive at camp and your horse fails to vet-in; you will receive a refund less deposit.

Rider Name _____ AERC# _____

Rider Address _____ City _____ State _____ Zip _____

Cell Phone: _____

Featherweight (up to 160 lbs.) _____ Lightweight (161 to 185 lbs.) _____ Middleweight (186 to 210 lbs.) _____

Heavyweight (211 lbs. and up) _____ 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: Enter Amount	Dec. 1 (Friday) Legends Awards at Dinner/ meeting	Dec. 2 (Saturday)	Totals
Intro: \$75 Includes dinner & awards, vet in & vet out			
30 Mile: \$100			
55 Mile: \$110			
100 Mile: \$135 (Saturday Only)			
AERC Day Member Fee*: \$15			
Extra Dinner Ticket: \$12			
Parking: \$15 per rig			
Late Fee: \$20 Postmarked after 11/17 or at ride entry			
Total Due:			
Less: Deposit Minimum: \$50			

Make Checks to: **Silver Lining Stables**
Mail to:

Attn: Shockaloe Ride
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.*

*First 50 paid entries will receive the
Swag bags courtesy of our Corporate
Sponsors: The Silver Lining Stables,
Outback Steakhouse, Purina, Tractor
Supply, and others.*

*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!*

SHOCKALOE I & II
DECEMBER 1 & 2, 2017

Waiver of Liability - Statement of Rider

I wish to enter and participate in the Shockaloe I & II - Living Legends Rides, to be held Friday and Saturday, December 1 & 2, 2017. I have read the rules, conditions, and regulations of the event and will comply with them. As a participant in the Shockaloe I & II - Living Legends Rides, 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, its 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: _____