

DUNNS CREEK WINTER GALLOP
320 SISCO RD
POMONA PARK, FL 32181
SANCTIONED BY: AERC, SERA, SEDRA
DECEMBER 31, 2022

RIDE MANAGER: Vicky Thompson, 104 Violet Cir, Interlachen, FL 32148 Phone: 904-629-6522
RIDE SECRETARY: Carol Thompson, P. O. Box 302, Mims, FL 32754 Phone: 321-794-8235
(SEND ALL ENTRIES AND MONIES TO CAROL THOMPSON AT ABOVE ADDRESS)

RIDE ENTRY FEES: Intro - \$50.00 ** Juniors - \$80 ** 30 Mile - \$125 ** 50 Miler - \$125

*****AERC CHARGES A \$15.00 NON-MEMBER FEE FOR ALL NON-MEMBER RIDERS*****

30-Mile horses must be 48 months old, 50-Mile horses must be 60 month old. NEGATIVE COGGINS REQUIRED AT CHECK-IN FOR ALL HORSES. ALL HORSES SHOULD BE PRESENTED FOR PRE-RIDE VETERINARY INSPECTION STARTING AT 3:00 PM FRIDAY, DECEMBER 30, 2022. PLEASE NOTIFY RIDE MANAGEMENT IF YOU EXPECT TO ARRIVE LATE. RIDE TO START AT APPROXIMATELY 7:30 AM. PRE-ENTRY IS REQUIRED. A refund minus \$30 will be made post ride if you're unable to attend and notify ride manager. If ride manager is not notified, no refund will be given.

PRE-ENTRY IS REQUIRED. ENTRIES MUST BE RECEIVED BY THURSDAY, DECEMBER 29, 2022. IF ABSOLUTELY NECESSARY, WE WILL ACCEPT ENTRIES AT THE RIDE. PLEASE LET RIDE MANAGER KNOW. BRING THE REGISTRATION AND ALL NECESSARY DOCUMENTATION.

FACILITIES: THIS IS A GRASSY FLAT PRIMITIVE CAMPSITE WITH NO ACCESSIBLE WATER. PLEASE BRING YOUR OWN WATER AND HORSE WATER IF POSSIBLE. THE PARK SERVICE WILL BE PROVIDING WATER FOR THE RIDE. PLEASE PARK TIGHT AS SPACE IS LIMITED. TWO PORTA POTTIES WILL BE AVAILABLE – THERE IS ALSO TWO COMPOSTING TOILETS IN THE PARKING AREA RIGHT BEFORE THE CAMPING AREA. NO SHOWERS AVAILABLE.

CAMPING: PARK OPENS 10:00 AM FRIDAY, DECEMBER 30, 2022. ALL RIGS MUST LEAVE BY 12:00 PM (NOON) ON SUNDAY, JANUARY 1, 2023.

TRAILS: THE TRAILS ARE BAREFOOT FRIENDLY AND AWESOME. THERE IS A FLAT PINE/PALMETO FOREST CALLED PINE ISLAND, THERE IS A HARDWOOD FOREST CALLED THE WIDE BECAUSE OF THE FLOWING CREEK THAT PASSES THROUGH IT AND THERE IS THE BADLANDS WHICH YOU WILL HAVE MOSTLY HARD PACKED SAND AND THE MOST AMAZING HILLS YOU WILL RIDE IN FLORIDA (SO BE PREPARED). NATURAL WATER AND WATER STOPS WILL BE AVAILABLE

AWARDS: COMPLETION AWARDS WILL BE AVAILABLE FOR PICK-UP AT REGISTRATION. TOP TEN AND JUNIOR AWARDS WILL BE AVAILABLE IMMEDIATELY POST RIDE. BEST CONDITION AND HIGH VET WILL BE PRESENTED AT RIDER AWARD MEETING. AWARD TIME TO BE DETERMINED.

FOOD: FRIDAY NIGHT MEAL INCLUDING VEGETARIAN WILL BE AVAILABLE 6:00 PM AND RIDERS MEETING TO FOLLOWING APPROXIMATELY 6:30 PM.

MORNING OF RIDE FOOD: COFFEE, HOT CHOCOLATE, ORANGE JUICE, OATMEAL AND SNACKS WILL BE PROVIDED AND AVAILABLE AT 5:30.

GRILL CHEESE STATION: WILL BE AVAILABLE TO ALL RIDERS AND VOLUNTEERS FROM 10:00 AM TO 2:00 PM

RIDERS MEETING: A NUMBER OF THINGS WILL BE COVERED INCLUDING TRAIL MARKINGS, TIMER INFORMATION, VET INFORMATION. IT BEHOOVES EVERYONE TO ATTEND THIS MEETING.

DIRECTIONS: FROM THE NORTH: TAKE US17 SOUTH THROUGH PALATKA APPROXIMATELY 15 MILES TO SISCO RD. (YOU WILL SEE A PARKING AREA ON US 17 THAT SAYS DUNNS CREEK – THAT IS NOT YOUR TURN OFF. GO PAST THAT A VERY SHORT DISTANCE TO SISCO RD TURN OFF). TURN LEFT ON SISCO RD APPROX 2.5 MILES TO LEFT AT PARK ENTRANCE (DO NOT STOP AT PAY BOX – ALL THAT IS TAKEN CARE OF). TAKE PAVED RD TO CAMPING AREA APPROX 3 MILES.

FROM THE SOUTH: TAKE 40 EAST TO BARBERVILLE. TURN RIGHT ON US 17 TO PAST POMONA PARK TO SISCO RD APPROX 28 MILES. TURN RIGHT ON SISCO RD APPROX 2.5 MILES TO LEFT AT PARK ENTRANCE. (DO NOT STOP AT PAY BOX – ALL OF THAT IS TAKEN CARE OF). TAKE PAVED RD TO CAMPING AREA APPROX 3 MILES.

STAFF: VETS: ROBERT MARSHALL, MELISSA RIBLEY, DOUG SHEARER
TIMER: CAROL THOMPSON AND ART KING
TRAIL MASTER: MYA DOSSAT

ABUSE OF STAFF, VOLUNTEERS OR OTHER RIDERS IS GROUNDS FOR IMMEDIATE DISQUALIFICATION

ENTRY FORM: DUNNS CREEK WINTER GALLOP 30/50

CHECKS PAYABLE TO: VICKY THOMPSON

MAIL ENTRIES: CAROL THOMPSON

P. O. BOX 302

MIMS, FL 32754

RIDER NAME _____ **RIDER AERC #** _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____ **EMAIL** _____

HORSE NAME _____ **AERC #** _____

BREED _____ **REGISTRATION #** _____

COLOR _____ **SEX** _____

COGGINS ACCESSION # _____ **COGGINS DATE** _____

OWNERS NAME _____

RIDE MILEAGE (PLEASE CIRCLE ONE) **INTRO \$50** **30 MILE \$125** **50 MILE \$125**

JUNIOR 30 - \$80 **JUNIOR 50 - \$80**

ENTRY FEE: _____

NON-MEMBER OF AERC (ADD \$15) _____

EXTRA MEALS \$15 _____

FEE PER RIG \$30 _____

TOTAL AMOUNT DUE: _____

PLEASE SEND ENTRY AND PAYMENT MADE OUT TO VICKY THOMPSON TO CAROL THOMPSON AT ABOVE ADDRESS.

AS A PARTICIPANT IN THE DUNNS CREEK WINTER GALLOP RIDE, I AGREE TO ABIDE BY THE RULES OF THE AMERICAN ENDURANCE RIDE CONFERENCE, INC ("AERC"), SOUTHEAST ENDURANCE RIDERS ASSOCIATION ("SERA"), SOUTHEAST DISTANCE RIDERS ASSOCIATION, INC. ("SEDRA"), THE FRIENDS OF DUNNS CREEK ASSOCIATION AND THE FLORIDA PARK SERVICE. I UNDERSTAND THAT THE SPORT OF DISTANCE RIDING INVOLVES BEING IN REMOTE AREAS FOR EXTENDED PERIODS OF TIME, FAR FROM COMMUNICATIONS, TRANSPORTATION AND MEDICAL FACILITIES; THAT THESE AREAS HAVE MANY NATURAL AND MAN-MADE HAZARDS, AS WELL AS WILDLIFE AND DOMESTIC ANIMALS, WHICH RIDE MANAGEMENT CANNOT ANTICIPATE, IDENTIFY, MODIFY, CONTROL OR ELIMINATE; THAT HORSES CAN BE EXCITABLE, DIFFICULT TO CONTROL, UNPREDICTABLE AND THAT ACCIDENTS CAN HAPPEN TO ANYONE AT ANY TIME. BY SIGNING THIS RELEASE, IN CONSIDERATION OF ACCEPTING THE RIDE ENTRY INTO THIS EVENT, I DO HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS, WAIVE AND RELEASE AND HOLD VICKY THOMPSON, AERC, SERA, SEDRA, THE FRIENDS OF DUNNS CREEK, THE FLORIDA STATE PARKS, ALL MEMBERS OF RIDE MANAGEMENT, ALL RIDE PERSONNEL, ALL RIDER ASSISTANTS AND ALL OTHER PERSONS REGARDLESS OF THEIR CAPACITY IN ANY WAY CONNECTED WITH THE EVENT DESCRIBED HEREIN, THEIR REPRESENTATIVES, HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS FROM AND AGAINST ANY AND ALL RIGHT, CLAIM OR LIABILITY OF ANY KIND OR NATURE THAT I MIGHT HAVE. FURTHER, I DO ACKNOWLEDGE THAT SAID RELEASE WILL EXTEND TO ANY ACCIDENTS, DAMAGES OR ANY ANIMAL WITHIN MY CONTROL. I HEREBY CERTIFY THAT MY HORSE HAS NOT BEEN AND WILL NOT BE TREATED WITH OR GIVEN ANY MEDICATIONS WITHIN 48 HOURS OF THE CHECK IN TIME FOR THIS RIDE. I HAVE READ AND UNDERSTAND THE LIABILITY RELEASE.

RIDER'S SIGNATURE _____ DATE _____

RIDER'S PRINTED NAME _____ DATE _____

HORSE OWNER'S SIGNATURE _____ DATE _____

HORSE OWNER'S PRINTED NAME _____ DATE _____

SPONSOR STATEMENT **JUNIORS MUST RIDE WITH A SPONSOR AND WEAR A HELMET**

SPONSOR'S SIGNATURE _____ DATE _____

SPONSOR'S PRINTED NAME _____ DATE _____

SPONSOR'S BIRTHDATE _____ AGE OF JUNIOR _____