WITCHDANCE ENDURANCE RIDE TOMBIGBEE NATIONAL FOREST

APRIL 26&27, 2019

STINKIN JIM'S HORSE CAMP

HOUSTON, MS

HOSTED BY THE MISSISSIPPI ARABIAN HORSE ASSOCIATION

Location: Stinkin Jim's Horse Camp 662-414-0549

Sanctioned by AERC, SERA, and SEDRA

Ride Manager: Jane Lee 601-347-1850 leapingarab@yahoo.com

Co-Ride Managers: Katie Keenan and Brandy Fortenberry

Veterinarians: Drs. Troy "Ike" Nelson, DeDe Huff, and Jacque Broome

Ride Secretary: Karen Rowell

Timers: Lance McCoy and Nancy Gooch

TRAIL: Trails are mostly woods horse trails with excellent dirt footing and some hills. The trails will be well marked with signs and ribbons. All vet checks will be in camp. There will be some gravel access roads. ALL RIDERS MUST WEAR HELMETS WHEN MOUNTED.

CAMP: We will be camping at Stinkin Jim's Horse Camp. There are restrooms and showers open to everyone. A limited number of electrical sites will be available. MUST BE RESERVED IN ADVANCE AND ARE NONREFUNDABLE. Quiet hours will begin at 10 p.m., thus generators will be required to be turned off. There are covered and uncovered stalls (panels) available. Shavings are NOT provided. There are a limited number of cabins available for rent on a first come, first serve basis. ***Please contact the campground to reserve electric sites, cabins, and stalls. Contact Melisha Sims 662-414-0549 to make ALL

reservations. MAHA will ONLY be responsible for entries into the ride.*** Dogs are welcome, but must be leashed at all times.

PLEASE PRE-REGISTER: Please send a completed entry form with ONLY your \$30 non-refundable deposit. A current negative Coggins is required for every horse. Please provide a copy at check in. Also, please have a current copy of your AERC membership card as well.

RIDE INFO: Registration will begin at 2 p.m. on Thursday, April 25th. Vet in will begin at 3 p.m. The ride meeting will be held at 6 p.m. on Thursday night and again at 6 p.m. on Friday night. 50 mile riders will ride out at 7 a.m. and 30 mile riders will leave at 7:30 a.m. Introductory riders will leave at 9 a.m.

AWARDS: Completion, Junior, Top 10, and Best Condition

FOOD: Meals will be available through Stinkin Jim's manager Melisha Sims. You MUST contact her and purchase any meals needed.

YOU MUST SHOW YOUR AERC CARD SO AS NOT TO BE CHARGED THE \$15 NON MEMBER FEE!

DIRECTIONS:

Traveling from the Natchez Trace Parkway, exit at the Highway 8 Houston Exit and then left onto Highway 8. Take a right just past the memorial gardens cemetery onto County Road 101. You will dead end into County Road 406, turn right. You will go under the Natchez Trace and then turn left onto County Road 52.

You will go under the Natchez Trace again, go approximately 4/10 of a mile and Stinkin Jim's will be on your left. There are signs along the way.

Traveling from Highway 15 or Highway 8 West, come through Houston. *When you see Wal-Mart slow down* County Road 406 is right across from the

hospital. Turn left onto County Road 406. Stay on 406. You will go under the Natchez Trace and then turn left onto County Road 52. Finish with the directions above.

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26 & 27 APRIL 2019

HOUSTON, MS

Rider Name:		AERC #:	
Address:		City:	
State: ZIP code: _		Phone #:	
Email address:			
☐ Adult (Senior) Rider ☐ Junior	· Rider / Age _	(Adult Sponsor Name	e:)
			e #:)
In case of Emergency Contact (list 2)			
1)		Phone	
2)		Phone	
Wei	ight Division -	- If Senior (Select One)	
Feather Weight (up to 160 lbs)		Heavyweight (211 + lbs)	
Lightweight (161-185 lbs)		Junior**	
Middleweight (186-210 lbs)			
**Junior riders must with a sponsor over unsponsored young rider pursuant to re pay full entry fee and designate a weig	ule 10.3.2. You	l or have a letter from AERC al ing riders allowed to ride with	llowing them to ride as an out an adult sponsor must
Horse Name:		AERC #:	
Breed:			
Owner's Name (if not rider)		Phone:	

RIDE FEES:

Entry Fee		Day 1	Day 2	Totals
Introductory Ride	\$65			
Junior-30 Mile	\$65			
Junior-50 Mile	\$65			
30 mile	\$105			
50 mile	\$105			

^{*}LD mile horses must be at least 4 years old

^{*50} mile horses must be at least 5 years old

Late Fee (if entry is not received by March 30, 2019)	\$15	
AERC Non-Member Fee	\$15	

SUM	TOTAL	

Refund policy: Full refunds made for non-starters, minus \$30 fee*	

Non-Refundable deposit due with entry - \$30	-\$30.00

AMOUNT DUE WHEN SIGNING INTO THE RIDE	

LIABILITY RELEASE

As a participant in the Witchdance Endurance Ride sponsored by the Mississippi Arabian Horse Association (MAHA), on 26 & 27 April, 2019, I hereby agree to comply with any rules of AERC, SERA and the conditions and regulations of this event. I understand that endurance 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, which ride management cannot anticipate, identify, modify or eliminate. I understand that horses can be excitable, difficult to control and unpredictable and that accidents can happen to anyone at any time. I assume full responsibility for myself and the animal I am riding or is in my care. I will hold MAHA, AERC, SERA, it officers and all individuals members thereof, all ride personnel, and all property owners over whose land I may cross, their representatives, successors and assigns, blameless for any accident, injury or lass that might occur due to my participation in the Witchdance Endurance Ride. I further agree to hold any and all of the aforementioned individuals and organizations free from all liability for such injury or loss. This release extends to all claims of every kind and nature whatsoever, whether known or unknown 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 LIABLIE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

I hereby certify that my horse is not under influence of medication and will not be treated with or given any medication prohibited by AERC rules. I also hereby give permission to AERC or its duly appointed agent to take any

appropriate action deemed necessary to check for possible administrations of drugs to my horse. The undersigned verified acceptance of risks and responsibilities for rider's and horses conditions and certifies that all information on this form is correct to the best of his/her knowledge.

I give consent for an will be financially responsible for emergency medical treatment for myself and/or the horse that I am riding or is in my care if I am unable to give informed consent.

HELMETS MUST BE WORN BY ALL RIDERS WHEN MOUNTED AND/OR ON THE TRAIL

I ACKNOWLEGE THAT I HAVE READ AND UNDERSTAND AND AGREE WITH THE CONDITIONS OF THIS RELEASE.

DATED:	, 20	
RIDER'S SIGNATURE:		
Signature of Parent/Guardian of Jun	nior Rider:	
Horse Owner's Signature:		The state of the s

MAKE CHECKS PAYABLE TO MAHA AND MAIL TO:

KATIE KEENAN 851 ST. JOHN RD BRAXTON, MS 39044