

# 2018 East Bay Hills Trails Benefit Ride Entry Form

Name(s) \_\_\_\_\_ Phone(s) \_\_\_\_\_ email \_\_\_\_\_

Address \_\_\_\_\_ City, State & Zip Code \_\_\_\_\_

Please check the days you will be riding:  All 6 Days  Wed  Thurs  Fri  Sat  Sun  Mon

Ride Entry Fees \$80/day times \_\_\_(number of days checked above) x\_\_\_ \$\_\_\_\_\_

\$450- all 6 days riding/camping x\_\_\_ \$\_\_\_\_\_

Non-Rider/Hiker Dinner/camping on \_\_\_nights \$15 per night x\_\_\_ \$\_\_\_\_\_ (note which nights)

Stay over Monday night, Sept 4 (no meals provided)-\$25x\_\_\_ \$\_\_\_\_\_

Additional contribution to the Ridge Trail and/or parks \$\_\_\_\_\_

Early Bird Discount --\$5/night up to \$25 if postmarked by June 29th \$\_\_\_\_\_

Late Fee --\$5/night up to \$25 for entries postmarked after August 14 \$\_\_\_\_\_

Trailer Info: Size: \_\_\_ (# horses) \_\_\_/ Tow Vehicle size / \_\_\_ (#) horses coming with this trailer

Please sign release form below and mail entry form & checks payable to TWHA c/o Total \$\_\_\_\_\_

Morris Older, 50 La Encinal, Orinda CA 94563

# 2018 East Bay Hills Trails Benefit Release of Liability

Name(s): \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City, State and Zip Code \_\_\_\_\_

I acknowledge that horseback riding is a sport which carries inherent risks of injury and damage to myself, my horse, and property. I knowingly assume all risks, whether known or unknown, of horseback riding.

I hereby release the Tilden Wildcat Horsemen's Association (hereinafter referred to as TWHA), the Metropolitan Horsemen's Association (MHA), the Bay Area Ridge Trail Council (BARTC), the East Bay Regional Park District (EBRPD), the East Bay Municipal Utility District (EBMUD), Volunteers for Outdoor California, (V-O-Cal) and the City of Oakland from all liability for any act of negligence or want of ordinary care on the part of TWHA, MHA and/or any of its agents. In consideration of my participation in this event, I waive, release, and discharge TWHA, MHA, BARTC, EBRPD, EBMUD, V-O-Cal, the City of Oakland and their directors, officers, agents, and members, their representatives, heirs, executors, and assigns from any and all claims of liability for injury or damage to myself, my animals, or my property arising out of my participation. This agreement is binding upon my executors, heirs, and assigns.

I expressly waive any rights I may have under California Civil Code 1542, which states: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him might have materially affected his settlement with the debtor."

I agree that I will indemnify and hold harmless TWHA, MHA, EBRPD, EBMUD, BARTC, V-O-Cal, the City of Oakland and their officers, directors, members, and agents against all claims, demands, and causes of action, including court costs, and actual attorney fees, arising from any proceeding or lawsuits brought by or prosecuted for my benefit, in which this release is upheld. TWHA, MHA, EBRPD, EBMUD, BARTC, V-O-Cal, the City of Oakland and their agents or employees shall not be liable for any damage which may accrue from any cause or as a result of fire, theft, running away, state of health, or injury to person, horse or property.

**I acknowledge that I have read this Release of Liability and know and understand its contents.**

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

**MINORS DO NOT SIGN THIS FORM-- PARENT OR LEGAL GUARDIAN MUST COMPLETE THIS SECTION**

I, the undersigned parent or guardian of the above participant, in consideration of my minor's participation in the event, agree that the terms and conditions of this Release of Liability shall be binding as to damage or injury to my minor, his animals, and property arising out of his participation in events.

**I acknowledge that I have read this Release of Liability and know and understand its contents.**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY, STATE & ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ : DATE \_\_\_\_\_ SIGNATURE: \_\_\_\_\_