

#### **REGISTRATION FORM**

#### Ride & Tie Long Course (25 miles)

FRIDAY, SEPTEMBER 20, 2024

| RIDER #1 INFORMATION    |  | RIDER #                 | 2 INFORMATION |
|-------------------------|--|-------------------------|---------------|
| Rider Name:             |  | Rider Name:             |               |
| Street Address:         |  | Street Address:         |               |
| City, State, Zip        |  | City, State, Zip        |               |
| Phone:                  |  | Phone:                  |               |
| Email:                  |  | Email:                  |               |
| R&T Association #:      |  | R&T Association #:      |               |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |               |

|  | HORSE INFORMATION               |               |  |  |  |
|--|---------------------------------|---------------|--|--|--|
| Horse's Name:  |                                 | Breed:        |  |  |  |
| Sex (Mare, Gelding, Stallion):   |                                 | Color:        |  |  |  |
| Horse Owner:   |                                 |               |  |  |  |
| I will allow my horse to be drug tested  | : (owner initials)              |               |  |  |  |
| If pulled for metabolic reasons, horse   | will not leave camp until relea | sed by a vet: |  |  |  |
| Rider #1 Initials: Rider #2 Initials: Owner Initials:                                  |                                 |               |  |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                                 |               |  |  |  |
| Membership is \$35/per year per person.  |                                 |               |  |  |  |

## OR

# Ride & Tie Short Course (16 miles)

FRIDAY, SEPTEMBER 20, 2024

| RIDER #1 INFORMATION    | RIDER #2 INFORMATION    |  |
|-------------------------|-------------------------|--|
| Rider Name:             | Rider Name:             |  |
| Street Address:         | Street Address:         |  |
| City, State, Zip        | City, State, Zip        |  |
| Phone:                  | Phone:                  |  |
| Email:                  | Email:                  |  |
| R&T Association #:      | R&T Association #:      |  |
| First Ride & Tie (Y/N): | First Ride & Tie (Y/N): |  |

| HORSE INFORMATION  |                                   |                   |  |  |
|--|-----------------------------------|-------------------|--|--|
| Horse's Name:  |                                   | Breed:            |  |  |
| Sex (Mare, Gelding, Stallion):   |                                   | Color:            |  |  |
| Horse Owner:   |                                   |                   |  |  |
| I will allow my horse to be drug   | tested: (owner initials)          |                   |  |  |
| If pulled for metabolic reasons,   | horse will not leave camp until r | eleased by a vet: |  |  |
| Rider #1 Initials: Rider #2 Initials: Owner Initials:                                  |                                   |                   |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                                   |                   |  |  |
| Membership is \$35/per year per person.  |                                   |                   |  |  |



# REGISTRATION FORM Ride & Tie Intro (5 miles)

## FRIDAY, SEPTEMBER 20, 2024

| RIDER #1 INFORMATION    |  | RIDER #                 | 2 INFORMATION |
|-------------------------|--|-------------------------|---------------|
| Rider Name:             |  | Rider Name:             |               |
| Street Address:         |  | Street Address:         |               |
| City, State, Zip        |  | City, State, Zip        |               |
| Phone:                  |  | Phone:                  |               |
| Email:                  |  | Email:                  |               |
| R&T Association #:      |  | R&T Association #:      |               |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |               |

|  | HORSE INFORMATION               |               |  |  |  |
|--|---------------------------------|---------------|--|--|--|
| Horse's Name:  |                                 | Breed:        |  |  |  |
| Sex (Mare, Gelding, Stallion):   |                                 | Color:        |  |  |  |
| Horse Owner:   |                                 |               |  |  |  |
| I will allow my horse to be drug tested  | : (owner initials)              |               |  |  |  |
| If pulled for metabolic reasons, horse   | will not leave camp until relea | sed by a vet: |  |  |  |
| Rider #1 Initials: Rider #2 Initials: Owner Initials:                                  |                                 |               |  |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                                 |               |  |  |  |
| Membership is \$35/per year per person.  |                                 |               |  |  |  |

## OR

# Equathon (12 Mile Ride/6 Mile Run)

FRIDAY, SEPTEMBER 20, 2024

| RIDER I                 | DER INFORMATION RUNNER INFORMATION (Leave Blank if |                         | TION (Leave Blank if Same) |
|-------------------------|--|-------------------------|----------------------------|
| Rider Name:             |  | Rider Name:             |                            |
| Street Address:         |  | Street Address:         |                            |
| City, State, Zip        |  | City, State, Zip        |                            |
| Phone:                  |  | Phone:                  |                            |
| Email:                  |  | Email:                  |                            |
| R&T Association #:      |  | R&T Association #:      |                            |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |                            |

| HORSE INFORMATION  |   |        |  |  |
|--|---|--------|--|--|
| Horse's Name:  |   | Breed: |  |  |
| Sex (Mare, Gelding, Stallion):   |   | Color: |  |  |
| Horse Owner:   |   |        |  |  |
| I will allow my horse to be drug   | tested: (owner initials)  |        |  |  |
| If pulled for metabolic reasons,   | If pulled for metabolic reasons, horse will not leave camp until released by a vet: |        |  |  |
| Rider #1 Initials: Rider #2 Initials: Owner Initials:                                  |   |        |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |   |        |  |  |
| Membership is \$35/per year per person.  |   |        |  |  |



#### **REGISTRATION FORM**

# Ride & Tie Longest Course (50 miles)

**SATURDAY, SEPTEMBER 21, 2024** 

| RIDER #1 INFORMATION    |  | RIDER #                 | 2 INFORMATION |
|-------------------------|--|-------------------------|---------------|
| Rider Name:             |  | Runner Name:            |               |
| Street Address:         |  | Street Address:         |               |
| City, State, Zip        |  | City, State, Zip        |               |
| Phone:                  |  | Phone:                  |               |
| Email:                  |  | Email:                  |               |
| R&T Association #:      |  | R&T Association #:      |               |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |               |

| HORSE INFORMATION  |  |               |  |
|--|--|---------------|--|
| Horse's Name:  |  | Breed:        |  |
| Sex (Mare, Gelding, Stallion):   |  | Color:        |  |
| Horse Owner:   |  |               |  |
| I will allow my horse to be drug   | tested: (owner initials)               |               |  |
| If pulled for metabolic reasons,   | horse will not leave camp until releas | sed by a vet: |  |
| Rider Initials: Runner Initials: Owner Initials:                                       |  |               |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |  |               |  |
| Membership is \$35/per year per person.  |  |               |  |

# OR

## Ride & Tie Long Course (25 miles)

SATURDAY, SEPTEMBER 21, 2024

| RIDER #1 INFORMATION    |  | RIDER #2 INFORMATION    |  |
|-------------------------|--|-------------------------|--|
| Rider Name:             |  | Runner Name:            |  |
| Street Address:         |  | Street Address:         |  |
| City, State, Zip        |  | City, State, Zip        |  |
| Phone:                  |  | Phone:                  |  |
| Email:                  |  | Email:                  |  |
| R&T Association #:      |  | R&T Association #:      |  |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |  |

| HORSE INFORMATION  |                         |                              |    |  |
|--|-------------------------|------------------------------|----|--|
| Horse's Name:  |                         | Breed                        | d: |  |
| Sex (Mare, Gelding, Stallion):   |                         | Colo                         | r: |  |
| Horse Owner:   |                         |                              |    |  |
| I will allow my horse to be drug   | tested: (owne           | r initials)                  |    |  |
| If pulled for metabolic reasons,   | horse will not leave of | amp until released by a vet: |    |  |
| Rider #1: Rider #2: Owner Initials:  |                         |                              |    |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                         |                              |    |  |
| Membership is \$35/per year per person.  |                         |                              |    |  |



# REGISTRATION FORM Ride & Tie Short Course (15 miles)

SATURDAY, SEPTEMBER 21, 2023

| RIDER #1 INFORMATION    |  | RIDER #2                | RIDER #2 INFORMATION |  |
|-------------------------|--|-------------------------|----------------------|--|
| Rider Name:             |  | Runner Name:            |                      |  |
| Street Address:         |  | Street Address:         |                      |  |
| City, State, Zip        |  | City, State, Zip        |                      |  |
| Phone:                  |  | Phone:                  |                      |  |
| Email:                  |  | Email:                  |                      |  |
| R&T Association #:      |  | R&T Association #:      |                      |  |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N): |                      |  |

| HORSE INFORMATION  |                  |                 |  |  |
|--|------------------|-----------------|--|--|
| Horse's Name:  |                  | Breed:          |  |  |
| Sex (Mare, Gelding, Stallion):   |                  | Color:          |  |  |
| Horse Owner:   |                  |                 |  |  |
| I will allow my horse to be drug tested: (owner initials)                              |                  |                 |  |  |
| If pulled for metabolic reasons, horse will not leave camp until released by a vet:    |                  |                 |  |  |
| Rider Initials:  | Runner Initials: | Owner Initials: |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                  |                 |  |  |
| Membership is \$35/per year per person.  |                  |                 |  |  |

## OR

# Ride & Tie Introduction (6 miles)

SATURDAY, SEPTEMBER 21, 2024

| RIDER #1 INFORMATION    | RIDER #2 INFORMATION    | RIDER #2 INFORMATION |  |
|-------------------------|-------------------------|----------------------|--|
| Rider Name:             | Runner Name:            |                      |  |
| Street Address:         | Street Address:         |                      |  |
| City, State, Zip        | City, State, Zip        |                      |  |
| Phone:                  | Phone:                  |                      |  |
| Email:                  | Email:                  |                      |  |
| R&T Association #:      | R&T Association #:      |                      |  |
| First Ride & Tie (Y/N): | First Ride & Tie (Y/N): |                      |  |

| HORSE INFORMATION  |           |     |              |  |
|--|-----------|-----|--------------|--|
| Horse's Name:  |           |     | Breed:       |  |
| Sex (Mare, Gelding, Stallion):   |           |     | Color:       |  |
| Horse Owner:   |           |     |              |  |
| I will allow my horse to be drug tested: (owner initials)                              |           |     |              |  |
| If pulled for metabolic reasons, horse will not leave camp until released by a vet:    |           |     |              |  |
| Rider #1:  | Rider #2: | Own | er Initials: |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |           |     |              |  |
| Membership is \$35/per year per person.  |           |     |              |  |



## **REGISTRATION FORM**

# Equathon (10 Mile Ride/6 Mile Run)

SATURDAY, SEPTEMBER 21, 2024

| RIDER INFORMATION       |  | RUNNER INFORMATION (Leave Blank if Same) |  |
|-------------------------|--|--|--|
| Rider Name:             |  | Runner Name:                             |  |
| Street Address:         |  | Street Address:                          |  |
| City, State, Zip        |  | City, State, Zip                         |  |
| Phone:                  |  | Phone:                                   |  |
| Email:                  |  | Email:                                   |  |
| R&T Association #:      |  | R&T Association #:                       |  |
| First Ride & Tie (Y/N): |  | First Ride & Tie (Y/N):                  |  |

| HORSE INFORMATION  |                  |                 |  |  |
|--|------------------|-----------------|--|--|
| Horse's Name:  |                  | Breed:          |  |  |
| Sex (Mare, Gelding, Stallion):   |                  | Color:          |  |  |
| Horse Owner:   |                  |                 |  |  |
| I will allow my horse to be drug tested: (owner initials)                              |                  |                 |  |  |
| If pulled for metabolic reasons, horse will not leave camp until released by a vet:    |                  |                 |  |  |
| Rider Initials:  | Runner Initials: | Owner Initials: |  |  |
| All participants must be members of the Ride and Tie Association (www.rideandtie.org). |                  |                 |  |  |
| Membership is \$35/per year per person.  |                  |                 |  |  |



# FEE SHEET Ride & Tie Championship

| EVENT   | COST  | SUBTOTAL |
|---|---|----------|
| Longest Course – 50 Miles<br>Saturday, September 20   | \$175/team  |          |
| Long Course – 25 Miles<br>Friday, September 20<br>Saturday, September 21                      | \$125/team  |          |
| Ride & Tie Introduction<br>Friday, September 20 (5 Miles)<br>Saturday, September 21 (6 Miles) | \$90/team   |          |
| Short Course<br>Friday, September 20 (16 Miles)<br>Saturday, September 21 (15 Miles)          | \$115/team  |          |
| Equathon<br>Friday, September 20<br>Saturday, September 21                                    | \$125/team<br>\$110/iron                          |          |
| Ride & Tie Membership   | \$35 per person annual<br>\$15 per person one-day |          |
| Friday Night Dinner – Catered by<br>Hope for Horses (Optional)                                | \$25 per person                                   |          |
| Early Bird Discount – Entry Sent in or Postmarked by September 1, 2024                        | Deduct \$25 from the total                        |          |
|   | TOTAL ENCLOSED:                                   |          |

#### **PAYMENT**

Make checks payable to Carrie Baris. \*\* Must pay in full with registration. Or Venmo to Carrie Baris @Carrie-Baris

Mail or Email the following: 1. Entry Forms 2. Payment 3. Current Negative Coggins 4. Release Forms

Mail to: Carrie Baris, 515 Saddleback Court, Asheville, NC 28803

Email to (if paying via Venmo): cbaris@rideandtie.org

Note: We have attempted to keep registration fees reasonable; however, the Biltmore Estate charges us per team, and we had to take that into consideration when pricing all distances.

CREW MEMBER NAMES (TWO PER TEAM) – Need to be included here for access to the Biltmore Estate through the entrance gate:

#### Ride and Tie Release

#### THIS IS A RELEASE. IT CONTAINS LIMITATIONS ON LIABILITY. READ IT!!!

I understand that Ride and Ties are hazardous activities which involve being in remote areas for a long time; that these areas have many natural and man-made hazards which race management cannot anticipate, identify, modify, or eliminate; that horses can be excitable, difficult to control, and unpredictable; and that accidents can happen to anyone at any time, and that there is NO ambulance or medical help present. I UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK and upon acceptance of my application for entry in the above-described races, I acknowledge that I assume FULL RESPONSIBILITY for my own safety. I and my heirs, executors, and administrators will hold the Ride and Tie Association, AERC, PNER, and all officers and directors thereof, any member of the race management and race personnel, and all property owners/tenants whose land the race crosses BLAMELESS for any injury or loss to myself or my horse which occurs due to my participation and free from all liability for such injury or loss. In short, I will not sue the race management, their personnel, landowners or tenants, Ride and Tie Association, AERC, PNER, for ANY REASON! I am fully aware of all race rules and agree to abide by those rules set down by the race management and Ride and Tie Association. " I fully understand the consequences for not following race rules. As a participant in this race, I have read the above liability release and will agree to abide by ALL rules. I grant my irrevocable permission to the Ride and Tie Association, it's authorized agent, and the event photographer, to use my name and any photographs, videos, motion pictures, records, or any other record of my participation in this event.

Rider # 1: \_\_\_\_\_\_ DATE: \_\_\_\_\_

| Rider #2:   | DATE:   |
|---|---|
| Horse Owner:  | DATE:   |
| MINORS OR JUNIORS MUST HAVE THE FOLLOWING RELEASE SIGNED.   |   |
| We, the undersigned parents or guardians understand that Ride and T injuries or accidents can occur, and that this ride has no medical aid or our child in the above-named ride AT THEIR OWN RISK and understand for the child's safety. We have read the above release that our child, a the release and ride rules. We agree to release the Ride and Tie Assoc directors and all members of ride management and personnel, and all demands, lawsuits or liabilities which might otherwise arise by virtue matter who is at fault. We do further authorize any ride personnel of the any emergency medical treatment by a properly licensed person, which agree to indemnify and hold harmless anyone giving such consent. I guarde and Tie Association, its authorized agent, and the event photographs, videos, motion pictures, records, or any other record of | r insurance for my child. We have entered d that we will assume full responsibility is a rider, has signed and fully understand liation, AERC, PNER, and all officers, all landowners/tenants, from all claims, of injury to our child or child's horse, no the above ride to consent in our behalf to the may be require for our child, and do rant my irrevocable permission to the apher, to use my child's name and any |
| For rider #1:   | _ DATE:   |
| Relationship to the above-named minor:  |   |
| For rider #2:   | _ DATE:   |

Relationship to the above-named minor: \_\_\_\_\_