

ATTENTION RIDERS

You must complete the following forms & submit them at Rider Check-In to receive your Rider Packet at Robie Park

PRINT AND SUBMIT EACH FORM ON A SEPARATE PIECE OF PAPER, AS EACH DOCUMENT GOES INTO A DIFFERENT MANAGEMENT BINDER

- EMERGENCY INFORMATION
- RIDER & HORSE BIOGRAPHY
- LIABILITY RELEASE FOR PALISADES/TAHOE (Use 2 Pages or print front to back.)
 - IF YOU ARE NOT THE OWNER OF YOUR MOUNT, YOU MUST SUBMIT FORMS A & B AT CHECK-IN, WHICH REQUIRE THE SIGNATURE OF THE OWNER OF YOUR MOUNT. *

 * (This requirement is new this year)

UPON RECEIPT OF THE ABOVE COMPLETED DOCUMENTS, YOU WILL BE GIVEN YOUR TEVIS RIDER PACKET

We have extra forms at the check-in table for your use.

EMERGENCY INFORMATION



This information is for official use by Tevis Management in the event of a rescue or medical emergency. Please provide as much **current** information as possible.

DO NOT MAIL THIS FORM. Hand Deliver to Ride Management during check-in.

Please PRINT (Legibly—your safety depends on our being able to read this form)

Rider #	Rider Name							Male	
Birth Date	Height	Weight	Hair Co	Color Eye color Home Phone					
Street Address				City			State	Zip	
Emergency Contact Person/s Name (This person MUST be able to be contacted during the ride in case of an emergency)									
Emergency Contact Person/s Cell or Telephone number/s									
Place where you will be staying before/during/after the Ride Phone number at this					per at this loc	ocation			
Crewmember Name Cell Number *** Vehicle/Trailer Make/Model & Color License Plate									
- Cit	ewmember Name	Och IV	umber	Verifici	e/ Haller I	nake/iviou	iei a coloi	License Plate	
*** Please instruct your crew to leave their cell phones on during ride day.									
Equine Name						Gelding	☐ Mare	☐ Stallion	
Breed		Color			l	Height	:	Weight	
Owner Name (if owner is not the rider)				Owner Contact cell/telephone number/s during Ride					
Please List special medical considerations and other information that might prove helpful in an emergency:									
please continue on reverse if needed									

6/12/2022 2:59 PM P 2 ps



Please fill this form out in advance and turn in at Ride Check-in.
ALL RIDERS OF THE TEVIS MUST COMPLETE THIS FORM

Additionally, if you are leasing your mount, the rider must submit "FORMS A & B" which require the owner's information and signature. Both Form A & Form B are included in the email: Rider's Digital Packet #2.

The information is for the Announcer at McCann Stadium as you take your victory lap.

It may also be used for press release and Tevis website purposes.

Rider #	Rider Name (and	der Name (and help with how to pronounce it)						
Home Town		Occupation	Years in Endurance	Tevis Attempts	Prior Tevis Completions			
Accomplish	ments in Endurance (c	areer miles, wins, B.C.'s, etc	.)		1			
Other riding	background (eventing	, jumping, rodeo, polo, etc.)						
Equine's Na	me	Nickname (if any)	Breed	Age	Sex			
Sire		Dam	Career Miles	Tevis Attempts	Prior Tevis Completions			
Accomplish	ments in Endurance (w	/ins, B.C.'s, etc.)			1			
Unique histo	ory (finished every ride	, rescue animal, etc.)						
5 B:-I	ONLY	Turne Committee Name			4			
Foreign Ride		Horse Owner's Name	F	lorse Owner's phone	#			
Home Count		City	State & ZIP Cod	de Will Owner				

PALISADES TAHOEGENERAL



ASSUMPTION OF RISK, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

Please print clearly:				FOR OFFICE USE	ONLY:
PARTICIPANT'S FIRST NAME			LAST NAME		
ADDRESS			CITY	STATE	ZIP
CURRENT AGE	DOB	EMAIL		HOME PHONE	

- 1. In consideration for and in connection with obtaining an **IKON PASS, PALISADES TAHOE SEASON PASS and/or other pass or ticket product** (collectively referred to herein as a "**PASS**"), I hereby execute this Assumption of Risk, Release of Liability and Indemnification Agreement (the "**AGREEMENT**") on behalf of myself and any children or dependents identified herein (collectively, the "**RELEASORS**").
- 2. WHEN I ENGAGE IN SNOW SEASON ACTIVITIES, INCLUDING WITHOUT LIMITATION SKIING, SNOWBOARDING, ICE SKATING, HOCKEY, TUBING, AND SNOWMOBILING, AND OTHER WINTER ACTIVITIES (COLLECTIVELY THE "WINTER ACTIVITIES"), I ACKNOWLEDGE THAT PARTICIPATION IN SUCH WINTER ACTIVITIES CAN BE DANGEROUS AND INVOLVE THE RISK OF INJURY AND DEATH. I understand that Winter Activities (including without limitation those specific Winter Activities set forth above) involve numerous risks including, but not limited to, the risks posed by variations in terrain and snow conditions, surface and subsurface snow conditions, icy or firm snow, unmarked obstacles, thin snow cover, bare spots, bumps, moguls, stumps, forest growth and debris, erosion control devices, rocks, cliffs, steep terrain, deep snow, avalanches and other hazards. I also understand Skiing and Snowboarding involve risks posed by loss of balance, loss of control, falling, sliding, collisions with other skiers, snowboarders, participants or spectators, and collisions with natural and man-made objects (padded or not), including trees, rocks, fences, posts, lift towers, snow making equipment, snowmobiles and other over-snow vehicles; and carelessness and misjudgments on the part of participants and staff, including failure to follow company policies and procedures. I acknowledge that it is up to me and/or dependent to have the physical dexterity and knowledge to safely load, ride and unload a lift, and that my child and/or dependent may use lifts without an adult present. I further AGREE that all of these risks and dangers are necessary to the sports of Skiing, Snowboarding and the other Winter Activities.
- 3. WHEN I ENGAGE IN NON-SNOW ACTIVITIES, INCLUDING WITHOUT LIMITATION USE OF BIKE TRAILS, CLIMBING, CLIMBING WALL, ZIPLINE, TRAMPOLINE, BUNGEE TRAMPOLINE, HIKING TRAILS, WATER FEATURES, DRY LAND TRAINING, SLACK LINING, TENNIS, YOGA, ROLLER BLADING/SKATING, AND OTHER OUTDOOR ACTIVITIES (COLLECTIVELY THE "NON-SNOW ACTIVITIES"), I ACKNOWLEDGE THAT PARTICIPATION IN SUCH NON-SNOW ACTIVITIES CAN BE DANGEROUS AND INVOLVE THE RISK OF INJURY AND DEATH. I understand that Non-Snow Activities (including without limitation those specific Non-Snow Activities set forth above) involve numerous risks including, but not limited to, the risks posed by steep and narrow trails and roads; impacting man-made and natural obstacles and objects, or being impacted by such obstacles or objects; jumps and other features; terrain variations; vehicles; varying and adverse weather conditions; drowning in pools, ponds or lakes; use of belaying equipment operated by myself or others; equipment failure, misuse, or malfunction; falling, slipping, jolting, jarring or shaking; carelessness and misjudgments on the part of participants and staff, including failure to follow company policies and procedures; high elevation; anxieties and fears associated with heights; encounters with plants, insects or animals, contact with other participants or their personal property; dizziness, fatigue, breaks, sprains, strains, bruises and other contusions; and property damage. I acknowledge that it is up to me and/or my child or dependent to have the physical dexterity and knowledge to safely load, ride and unload a lift, and that my child and/or dependent may use lifts without an adult present. I further agree that all of these risks and dangers are necessary to the Non-Snow Activities.
- 4. Despite the risks and dangers involved, and as consideration for being allowed to participate in Skiing, Snowboarding, Winter Activities and/or Non-Snow Activities (collectively, the "SPORTS") through the purchase of a PASS, on behalf of all of the RELEASORS, I AGREE TO EXPRESSLY ASSUME ANY AND ALL RISK OF INJURY OR DEATH which might be associated with the RELEASORS' participation in the SPORTS, and/or with the use of the facilities and associated infrastructure of Palisades Tahoe Olympic Valley and/or Alpine Meadows, including, but not limited to, the use of buildings and premises, walkways and parking lots, terrain parks and features, chairlifts and other conveyances, rental equipment, instruction, racing, special events, search and/or rescue, and skiing, snowboarding, riding or otherwise traveling beyond the boundary (collectively the "USE OF THE FACILITIES").
- 5. I AGREE NEVER TO SUE, AND TO RELEASE FROM LIABILITY, Palisades Tahoe Resort, LLC, Palisades Tahoe Ski Holdings, LLC, Palisades Tahoe Real Estate, LLC, Squaw Creek Associates, Caldwell, LLC, California Tahoe Conservancy, Alterra Mountain Company, the United States of America, Department of Agriculture, Forest Service, and all of their respective affiliates, subsidiaries, insurance companies, successors in interest, agents, employees, representatives, assignees, officers, directors and shareholders (collectively referred to as "PALISADES TAHOE") for any property damage, injury or loss, including death, which arises in whole or in part out of my and/or my child or dependent's participation in the SPORTS or USE OF THE FACILITIES, including without limitation those claims based on PALISADES TAHOE'S alleged or actual NEGLIGENCE, BREACH OF ANY CONTRACT AND/OR EXPRESS OR IMPLIED WARRANTY.

(Continued on back page)

PALISADES TAHOEGENERAL



ASSUMPTION OF RISK, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

6. I acknowledge that this **AGREEMENT** will prevent the **RELEASORS** from filing suit or making any claim for damages in the event of injury or death arising from the **RELEASORS**' participation in the **SPORTS** or **USE OF THE FACILITIES. I UNDERSTAND THIS IS A RELEASE OF LIABILITY AND AGREE THAT IT IS VALID FOREVER,** and will apply whenever the **RELEASORS** participate in the **SPORTS** or engage in **USE OF THE FACILITIES.** I understand and agree that each time I use my **PASS**, or anyone for whom I have executed this agreement uses his or her **PASS**, that use will constitute a renewal and reaffirmation of my and the user's acceptance of this **AGREEMENT**. **FURTHER, I UNDERSTAND AND AGREE THAT IF I RENEW OR PURCHASE A PASS FOR MYSELF OR FOR MY CHILD AT ANY POINT IN THE FUTURE, THIS SIGNED AGREEMENT WILL BE VALID AND BINDING UPON ME AND/OR MY CHILD.**

7. In the event any of the **RELEASORS** or any of their legal representatives file a claim or a lawsuit arising out of any of the **RELEASOR'S** participation in the **SPORTS** or the **USE OF THE FACILITIES, I AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS PALISADES TAHOE** from and against any damages, attorney's fees or costs arising out of such a claim or a lawsuit. Additionally, I **AGREE** that this **AGREEMENT** will be immediately admissible into evidence in response to any claim or lawsuit filed by **RELEASORS** or on **RELEASORS**' behalf.

- 8. I AGREE that if PALISADES TAHOE Management believes that my behavior or conduct is inappropriate or unsafe, they have the right to suspend or revoke my PASS without my having any right of refund or reimbursement. I further AGREE to abide by PALISADES TAHOE'S Mountain Safety & Courtesy Policies, located at http://palisadestahoe.com/skiing-riding/mountains/mountain-safety-courtesy-policies.
- 9. **I AGREE** that the **PASS** is non-assignable, non-refundable and cannot be transferred to another person or time period beyond the terms of the **PASS**. There are no exceptions, other than those available if Pass Protection is separately purchased. Use of my **PASS** by anyone other than me shall constitute fraud and will result in the immediate loss of all related privileges without compensation and may result in criminal prosecution.
- 10. **I AGREE** that if I travel beyond a resort boundary, I assume all risks associated with backcountry travel, including the risk of avalanches. **I AGREE** that I may be charged for any rescue. if available, beyond a resort boundary.
- 11. **I AGREE** to read and follow each and every rule stated in Your Responsibility Code, Cross Country Responsibility Code, Freestyle Terrain Users' Responsibilities, and sections 602(r) and 653i of the California Penal Code, as applicable.
- 12. **I AGREE** to grant to **PALISADES TAHOE** and its advertising and promotion agencies the right to use and publish worldwide and in perpetuity, in any and all forms of media now known or hereafter devised, including without limitation online and in social media, without approval or compensation, my image and/or performance captured at any **PALISADES TAHOE**. The personal information submitted to **PALISADES TAHOE** including name, mailing address, phone number, and email address, may be collected, processed, stored and used by **PALISADES TAHOE** for the purposes of marketing **PALISADES TAHOE'S** products and services to me, including contacting me by email and/or by telephone, to fullest the extent permitted by law. All personal information collected is subject to **PALISADES TAHOE'S** Privacy Policy, available at www.alterramtnco.com/ privacy-policy, which includes opt-out procedures.
- 13. In executing this **AGREEMENT**, I declare under penalty of perjury under the laws of the State of California that I am doing so only for myself and/or on behalf of persons for whom I have authority to execute. In the event that I execute this **AGREEMENT** on behalf of another person, and in the event that the other person brings a claim against **PALISADES TAHOE**, **I AGREE** to defend, indemnify and hold harmless **PALISADES TAHOE** as fully set forth in Paragraph 7 above.
- 14. **I AGRE**E that if I have purchased an IKON Pass, I will be required to sign an additional agreement in connection with obtaining the IKON Pass prior to utilizing the IKON Pass for the current Season, and I further **AGREE** that the terms of such agreement shall be supplemental to the terms of this **AGREEMENT.**
- 15. I ACKNOWLEDGE that this AGREEMENT is binding upon me and/or any person on behalf of whom I am executing, my heirs, assigns and legal representatives. I acknowledge that this AGREEMENT is severable and that if any clause is found to be invalid, the offending clause will be stricken and the balance of the AGREEMENT will remain in effect and will be enforceable. I AGREE that any action arising under this AGREEMENT will be brought in the Superior Court of Placer County, State of California. This AGREEMENT will be subject to and interpreted under the laws of the State of California.

SIGNATURE OF PARTICIPANT DATE Participants under the age of 18 years are required to have at least one parent or legal guardian read and sign. PRINT NAME OF PARENT/LEGAL GUARDIAN DEPENDENT DOB DEPENDENT DOB DEPENDENT DOB DEPENDENT DOB



Rider Name (print)



WESTERN STATES TRAIL RIDE July 16, 2022 ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL LIABILITY



Date

1. ACKNOWLEDGEMENT OF RISK: I am aware that the Western States 100 Mile Trail Ride is considered by many to be the most difficult and demanding endurance ride in the world and should only be attempted by riders who have ridden multiple endurance rides before attempting this one. The ride is difficult and hazardous for even experienced and well-conditioned horses and experienced healthy riders under the most favorable of conditions. I have been warned that I should not participate in this event unless: a) I have met the required qualifications and b) prior to Ride Day I have ridden a horse in the dark. I represent by signing this ACKNOWLEDGMENT OF RISK AND RELEASE OF ALL LIABILITY that my horse and I meet or exceed these minimum experience requirements. Initials: I FURTHER RECOGNIZE AND ACKNOWLEDGE THAT THIS IS A RISKY SPORT AND I AM FULLY AWARE AND ACCEPT RESPONSIBILITY FOR ALL THE RISKS AND DANGERS INHERENT IN THIS ACTIVITY: Including, but not limited to risks associated with stabling and transporting horses and risks from natural conditions, including wildlife such as rattlesnakes, bears, and mountain lions, hazards caused by the negligence or incompetence of other riders or their failure to control their mounts, hazards of vehicular traffic, narrow precipitous trails in remote wilderness areas, risks of injury from falling, altitude sickness, overuse, fatigue, dehydration, getting lost, exposure to elements and falling rocks and trees. These are only some of the risks. I understand that there is no way for Ride Management to anticipate, identify, modify or eliminate all risks nor has Ride Management undertaken to do so. I further understand that if in fact my horse or I become injured or incapacitated, it may be difficult or impossible to get required medical or veterinary aid to me or my horse in time to avoid additional physical injury or even death. Initials: 2. ASSUMPTION OF RISK: With full awareness of the above stated risks and all risks not stated I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK of personal injury including permanent disability and death to myself and all risk of injury or loss to my horse sustained while participating in this event including the risk of passive or active negligence on the part of the released parties. Initials: 3. RELEASE OF LIABILITY: With full awareness of the above stated risks and all risks not stated and in consideration of my being allowed to participate in this event, I, on behalf of myself, my heirs, executors and administrators, and anyone claiming through me hereby FOREVER RELEASE AND DISCHARGE the Western States Trail Foundation and the Officers, Directors, and/or members, agents, and employees of each, and all medical, veterinarian and other personnel assisting with the event or any of them and any other person assisting with this riding event including any public or private land owners over whose property the Ride passes, their representatives, successors and assigns, FROM ANY AND ALL CLAIMS OF LIABILITY FOR DAMAGE FOR ANY AND ALL INJURIES TO ME, MY HORSE, OR PROPERTY, ARISING OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THIS EVENT. Initials: 4. AGREEMENT TO INDEMNIFY AND HOLD HARMLESS: In further consideration of being allowed to participate in this event, I agree that I WILL DEFEND, INDEMNIFY AND HOLD HARMLESS, the Western States Trail Foundation and the officers, directors, members, agents, of each, against all claims, demands and causes of action, including Court costs and attorney fees, directly or indirectly arising from any action or other proceeding brought by or prosecuted for my benefit contrary to this agreement. 5. CERTIFICATION OF ABILITY AND AGREEMENT TO ABIDE BY RIDE RULES: I certify that I have the necessary skills and ability to participate in the Western States 100 Mile Ride, and I acknowledge that I will read the 2022 Western States 100 Mile Rider's Packet (sent electronically by email to each entrant and posted at teviscup.org), and I further agree to abide by all rules and instructions given to me either verbally or in writing by the Western States Trail Foundation. 6. MEDIA RELEASE: I hereby grant irrevocable permission to the Western States Trail Foundation, and any media covering the event, and the authorized agents, contractors and representatives of each, to use my name and likeness in any photographs, videotapes, motion pictures, recordings or any other records of my participation in this event for any purpose. 7. WAIVER OF RIGHTS: It is further understood and agreed that this event is a non-professional, amateur sporting event. It is conducted by an all volunteer board solely for the enjoyment of the participants, their friends, their families, and spectators. Any competitor who believes that he/she may have any direct or indirect financial interest in the outcome of the Ride; in his/her participation in the Ride; in his/her completion of the Ride; in his/her failure to complete the Ride; in his/her disqualification during the Ride or, as a result of sanctions imposed against him/her following the Ride for any reason whatsoever; hereby expressly and irrevocably waives his/her financial interest. Participants are expressly advised that, but for their agreement to this waiver provision, they or their agents or assigns may have various legal or equitable causes of action against various groups or individuals involved with the conduct of the Ride. In executing this paragraph of the ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL LIABILITY form, the participant expressly surrenders his/her right to seek monetary damages from any group or individual directly or indirectly involved with the conduct of the Ride and further agrees that any damages of any sort which otherwise might be alleged shall not exceed the liquidated sum of One Dollar (\$1.00). The participant further waives his/ her rights under California Civil Code Section 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 must have materially affected his settlement with the debtor." This waiver therefore applies to all potential claims for damage whether known or unknown, suspected or unsuspected. Initials: I ACKNOWLEDGE THAT I HAVE READ/UNDERSTAND AND I ACCEPT THE TERMS AND CONDITIONS STATED HEREIN AND I UNDERSTAND AND ACKNOWLEDGE THAT THIS AGREEMENT SHALL BE EFFECTIVE AND BINDING UPON ME AND ANYONE CLAIMING THROUGH ME AND EFFECTIVELY BARS MY RIGHT TO CLAIM DAMAGES OF ANY KIND INCLUDING INJURIES OR EVEN DEATH ARISING FROM MY PARTICIPATION IN THIS EVENT. I certify under penalty of perjury that I have provided true and complete information concerning my health and qualifications.

If Rider does not own the horse (includes all horses, ponies, mules, and donkeys) which is being entered into the 2022

Tevis, the owner must ALSO sign and date this form.

Signature of Horse Owner

Printed Name of Horse Owner



FORM B



RIDER AND HORSE BIOGRAPHY (The term "horse" includes all horses, ponies, mules and donkeys)

Please fill out in advance and turn in at Ride Check-in.

The information is for the Announcer at McCann Stadium as you take your victory lap. It may also be used for press release and Tevis website purposes.

Please PRINT CLEARLY... Rider to complete yellow boxes and owner to complete green boxes. Thank you.

			, ,					
Rider #	Rider Name (and he	d help with how to pronounce it)					Rider Age	
Home Town	Home Town Occup			Years in T			Prior Tevis	
				Endurance	Atten	npts	Completions	
Foreign Riders ONLY			Horse	Owner's Name	Α			
Home Country:			110136 Owner 3 Name					
Equine's Name		Nickname (i	f any)	ny) Breed		Age	Sex	
Sire		Dam		Career Miles		Tevis	Prior Tevis	
						Attempts	Completions	
Accomplishmen	nts in Endurance (wins	s, B.C.'s, etc.)						
Unique history (finished every ride, re	scue animal,	etc.)					
	•	Ť	ŕ					
Non Owner Ride		Horse Owne	er's Name Horse Ow		ner's phone #			
(This section must be completed								
	at rider check-in)							
Horse Owner's	street address	City		State & ZIP Code		Will Owner be on site at		
					the ride?		Y N	
						the ride:		
Owner's email a	iddress:	Owner's signature assures the event that the owner assumes						
	financial responsibility for emergency treatment/services should							
		such become necessary from rider check-in through veterinary						
		release from the 2022 Tevis Ride.						
Horse Owner Signature:					Date:			