



ATTENTION RIDERS

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

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**
- **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 is the second year this has been required)***

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

911

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					<input type="checkbox"/> Male <input type="checkbox"/> Female	
Birth Date	Height	Weight	Hair 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 location		

Crewmember Name	Cell Number ***	Vehicle/Trailer Make/Model & Color	License Plate

*** Please instruct your crew to leave their cell phones on during ride day.

Equine Name		<input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	
Breed	Color	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



RIDER AND HORSE BIOGRAPHY



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.

Please PRINT CLEARLY...

Rider #	Rider Name (...and help with how to pronounce it)				Rider Age
Home Town	Occupation	Years in Endurance	Tevis Attempts	Prior Tevis Completions	
Accomplishments in Endurance (career miles, wins, B.C.'s, etc.)					
Other riding background (eventing, jumping, rodeo, polo, etc.)					

Equine's Name	Nickname (if any)	Breed	Age	Sex
Sire	Dam	Career Miles	Tevis Attempts	Prior Tevis Completions
Accomplishments in Endurance (wins, B.C.'s, etc.)				
Unique history (finished every ride, rescue animal, etc.)				

Foreign Riders ONLY Home Country:	Horse Owner's Name	Horse Owner's phone #		
Horse Owner's street address	City	State & ZIP Code	Will Owner be on site at the ride? Y N	
Owner's email address:				



FORM A

WESTERN STATES TRAIL RIDE

July 29, 2023

ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL LIABILITY



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.

Initials: _____

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 2023 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.

Initials: _____

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.

Initials: _____

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.

Rider Name (print)

Signature of Horse Owner

Date

Printed Name of Horse Owner

If Rider does not own the horse (includes all horses, ponies, mules, and donkeys) which is being entered into the 2023 Tevis, the owner must ALSO sign and date this form.



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 help with how to pronounce it)				Rider Age
Home Town	Occupation	Years in Endurance	Tevis Attempts	Prior Tevis Completions	

Foreign Riders ONLY Home Country:		Horse Owner's Name			
Equine's Name	Nickname (if any)	Breed	Age	Sex	
Sire	Dam	Career Miles	Tevis Attempts	Prior Tevis Completions	
Accomplishments in Endurance (wins, B.C.'s, etc.)					
Unique history (finished every ride, rescue animal, etc.)					

Non Owner Rider Info (This section must be completed and submitted at rider check-in)	Horse Owner's Name		Horse Owner's phone #		
Horse Owner's street address	City	State & ZIP Code		Will Owner be on site at the ride? Y N	
Owner's email address:		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:		