



**St Augustine Pony Club  
Clinic/XC Schooling Entry Form**

**ACTIVITY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

Horse Name \_\_\_\_\_

Rider Name \_\_\_\_\_ JR/SR \_\_\_\_\_

Address \_\_\_\_\_

City State Zip \_\_\_\_\_

Tel No. \_\_\_\_\_

Email Address \_\_\_\_\_

Trainer \_\_\_\_\_

Desired Level (Clinic) \_\_\_\_\_

Cross Country Schooling \$35- per rider

TOTAL PAYMENT ENCLOSED \$ \_\_\_\_\_

**PRINT & MAIL**

Make Checks Payable to  
St Augustine Pony Club

**MAIL TO:** St. Augustine Pony Club  
c/o Trish Brown, 1730 Hopewell  
Road, Port Deposit, MD 21904

**OR**

**SUBMIT & PAY**

**ONLINE!!!!!!**

Email / Paypal Address:  
Secretary@StAugustinePonyClub.com

**Please remember to include a copy of current coggins.**

For more info email: [Secretary@StAugustinePonyClub.com](mailto:Secretary@StAugustinePonyClub.com)

Fax/Call: 302-378-0846

**RELEASE OF LIABILITY AGREEMENT- RIDERS/DRIVERS ON UNICORN FARM PROPERTY**

Unicorn Farm Properties, Dr William H Wright and Helena duPont Wright (hereinafter referred to as "Owner"), St Augustine Pony Club, and its directors, officers, and volunteers (hereinafter referred to as "Organizer") and the adult participant, or parent or guardian of a minor child requestor (hereinafter referred to as "Participant") on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, agree as follows:

Owner and/or Organizer provides equine training facilities, including but not limited to land, stables, riding arenas, cross country fences, driving obstacles, and trails (hereinafter referred to as "Facilities").

Participant uses Owner's and/or Organizer's Facilities for the purpose of boarding, lessons. Training, schooling, and/or showing of Participant's horse(s), either in an organized activity, or with Participant acting on his or her own. Participant has examined the facilities and has found them safe and acceptable. Participant is aware that the surface and subsurface conditions of the land, trails, and pond will change due to weather and previous riders/drivers, particularly in the immediate vicinity of cross country fences, and driving obstacles. Participant is aware of the varying difficulty of fences, cross country fences, and driving obstacles, and has not misrepresented the level of ability of either him/herself or the horse(s). Participant is aware of the inherent risk of an equine activity due, but not limited to, the propensity of the horse to react unpredictably and the participant's inability to control the horse(s) in some circumstances. Participant agrees to relieve and absolve the Owner and/or Organizer from any claim which the Participant may have against the Owner and/or Organizer for its negligence or acts of omissions which cause any loss or injury to Participant while on or using Owner's and/or Organizer's Facilities. IN CONSIDERATION of the above and the use of Facilities provided by Owner and/or Organizer, PARTICIPANT AGREES TO RELEASE AND WAIVE, AND HOLD HARMLESS AND INDEMNIFY Owner, Organizer, its agents and employees, against any and all actions from the Participant or horse(s) suffering injury, loss, damage, or death while on or using the Owner's and/or Organizer's Facilities. This agreement will continue from time to time in relation to the periodic use of Facilities by the Requestor.

By Typing Initials here, Participant agrees to the terms and conditions above

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_

(Participant or parent/guardian)/Name of Minor Child \_\_\_\_\_

PRINT NAME \_\_\_\_\_