## **BCA Registration Form/Hold Harmless**

Name:	
Address:	
City:	State: Zip:
Phone:	Email:
Emergency Contact Name	:
Emergency Contact Phone	o:
Negative Coggins Presente	ed: Y or N (If NO, cannot participate.)
injury to, or death of, a par activities. RIDE and/or PA I have read the above writt Trailriders, Inc., it's officer Trailriders, Inc. function: f from any claim of injury to pets, and/or personal prope I also understand and accep and family member, horses Inc. function that I attend/p Each family member of the sign for minors. I have read and agree to the	aw, an equine activity sponsor or equine professional is not liable for an reticipant in equine activities resulting from the inherent risk of equine ARTICIPATE AT YOUR OWN RISK!!  ten Florida State Statute and hereby release Levy County Horse Club res and members, and any co-sponsor related to any Levy County Horse Club for any and all my activities with Levy County Horse Club Trailriders, Inc.; or damages that may occur to myself, and other family members, horses, erty.  The FULL responsibility for any claim of injury or damages caused by myself, so, pets, and/or personal property at any Levy County Horse Club Trailriders, participate in.  The age of 18 or over must sign for themselves. Parents or legal guardians must be Hold Harmless Agreement under Florida Law.  Date:  Date:

Please print this page out, fill in the blanks and submit it with your registration fee at the event registration table the morning of the event, where you will receive your lunch bracelet.