## **NJ-PA-MD CMO Rider Entry Form 2023** (New Jersey) NATIONAL ASSOCIATION OF COMPETITIVE MOUNTED ORIENTEERING

	Ride Managers:			
Emergency Phone # Na		e of contact	Relationship to you	
Complete all that apply	below:			
□ Member	NACMO Rider # _			
Day Rider	address:			
	email Address:			
	Phone number:		Member that invited you:	
□ <b>Junior Rider</b> Date of Birth Name of adu				
Day 1: Circle One:	Individual	Group	Declared Tean	1
Team name	2:		Team's State:	Number:
Stable Name of Equine				
		Owner		
Day 2: Circle One:	Individual	Group	Declared Tear	n
Team name	e:		Team's State:	Number:
Stable Name of Equine			NACMO #	
			Owner	
WARNING UNDER NEW JERSEY LAW, AN SPONSOR OR PROFESSI SHALL NOT BE LIABLE FO INJURY TO OR THE DEAT A PARTICIPANT IN EQU ACTIVITIES RESULTIN FROM THE INHEREN RISKS OF EQUINE ACTIV New Jersey Session Law Pursuan To PL. Chap	EQUINE ONAL OR AN H OF BY SIGNING B H OF HOF MIGHT RESUL IG NACMO MEMB T WHO ENGAG	HIS FORM. IF THE PARENT OR LEGAL G ELOW, I AFFIRM TH T IN INJURY TO OF MY PARENT/GUARD ERS, ACCOMPANYII <i>E IN EQUINE AC</i> LITY FOR INJURY	NON-MEMBER IS UNDER AG GUARDIAN. AAT I UNDERSTAND THAT R DEATH OF RIDER AND/C IAN HAS SIGNED) THE N NG THIS FORM FOR NON- <b>TIVITIES ASSUME THE</b>	TE, SIGNED LIABILITY WAIVER MUST GE 18, THE LIABILITY WAIVER MUST BE HORSEBACK RIDING IS DANGEROUS AND R HORSE. I HAVE READ, AGREE TO AND ACMO LIABILITY WAIVER (ON FILE FOR MEMBERS). WARNING PARTICIPANTS RISKS OF ENGAGING IN AND LEGAL PERSON OR PROPERTY PURSUANT TO
Participant's signature			Ride Date	
Signature of ADULT riding with and supervising Junior Rider:			Ride Date	
For Ride Manager use Or	nly:	•••••		
Received for Day 1 <u>CK #</u> (And) \$ Received for Day 2 <u>CK #</u> Y N  Did this rider bring a "guest"? Name of Guest:  Received for Day 2 <u>CK #</u> Y N  Was this rider given a discount entry or had a Ride Voucher?  Y N    Y N  Was this rider mentoring a "guest" at this ride?				