

NJ-PA-MD CMO Rider Entry Form 2021 (New York)

NATIONAL ASSOCIATION OF COMPETITIVE MOUNTED ORIENTEERING

Ride Name: _____ Ride Managers: _____

Rider Name: _____ Cell Phone # (for emergency use only) _____

Emergency Phone # _____ Name of contact _____ Relationship to you _____

Complete all that apply below:

- Member** NACMO Rider # _____
- Day Rider** address: _____
 email Address: _____
 Phone number: _____ Member that invited you: _____
- Junior Rider** Date of Birth _____ Name of adult riding w/ you _____

Day 1: Circle One:	Individual	Group	Declared Team
Team name: _____	Team's State: _____	Number: _____	
Stable Name of Equine _____	NACMO # _____		
Registered Equine Name _____	Owner _____		
Day 2: Circle One:	Individual	Group	Declared Team
Team name: _____	Team's State: _____	Number: _____	
Stable Name of Equine _____	NACMO # _____		
Registered Equine Name _____	Owner _____		

New York Equestrian Helmet Statute

New York Vehicle and Traffic Law § 1265.

ANY PARTICIPANT IN A PUBLIC EQUINE EVENT MUST BE WEARING A HELMET MEETING OR EXCEEDING ASTM F1163

FOR RIDERS WHO ARE NOT MEMBERS OF NACMO, A SEPARATE, SIGNED LIABILITY WAIVER MUST ACCOMPANY THIS FORM. IF THE NON-MEMBER IS UNDER AGE 18, THE LIABILITY WAIVER MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN.

BY SIGNING BELOW, I AFFIRM THAT I UNDERSTAND THAT HORSEBACK RIDING IS DANGEROUS AND MIGHT RESULT IN INJURY TO OR DEATH OF RIDER AND/OR HORSE. I HAVE READ, AGREE TO AND SIGNED (OR MY PARENT/GUARDIAN HAS SIGNED) THE NACMO LIABILITY WAIVER (ON FILE FOR NACMO MEMBERS, ACCOMPANYING THIS FORM FOR NON-MEMBERS). **WARNING PARTICIPANTS WHO ENGAGE IN EQUINE ACTIVITIES ASSUME THE RISKS OF ENGAGING IN AND LEGAL RESPONSIBILITY FOR INJURY, LOSS, OR DAMAGE TO PERSON OR PROPERTY PURSUANT TO NEW YORK LAW.**

BY SIGNING BELOW I ALSO UNDERSTAND THAT ATTENDING GROUP GATHERINGS CAN BE DANGEROUS AND I WILL HOLD HARMLESS NACMO, THIS NACMO EVENT MANAGEMENT AND ANY PARTICIPANT AT THIS NACMO EVENT, IN THE EVENT THAT I CONTRACT ANY INFECTIOUS DISEASE.

Participant's signature _____ Ride Date _____

Print & Signature of ADULT riding with and/or supervising Junior Rider: _____ Ride Date _____

For Ride Manager use Only:

\$ _____ Received for Day 1 **CK #** _____ (And) \$ _____ Received for Day 2 **CK #** _____

