NJ-PA-NY CMO Rider Entry Form 2025 (Pennsylvania)

NATIONAL ASSOCIATION OF COMPETITIVE MOUNTED ORIENTEERING

Ride Name:	Ride Managers:				
Emergency Phone #	Nam	ne of contact	R	elationship to you	
Complete all that apply	, below:				
□ Member	NACMO Rider #_		-		
Day RiderJunior Rider	address:				
	email Address:				
	Phone number:		Member that invited you:		
	Date of Birth Name of adult riding w/ you			w/ you	
Day 1: Circle One:	Individual	Group	Declared Team	1	
Team name	e:		Team's State:	Number:	
Stable Name of Equine					
Registered Equine Name					
		_			
Day 2: Circle One:	Individual	Group	Declared Tean	n	
Team name:			Team's State:	Number:	
Stable Name of Equine				NACMO #	
Registered Equine Name			Owner		
WARNING You assume	U dssume or stale of				
the risk of equine activities pursuant to Pennsylvania	RESULT IN INJURY TO PARENT/GUARDIAN H. ACCOMPANYING THIS ACTIVITIES ASSUME	or death of rid as signed) the form for non-me t the risks of en	ER AND/OR HORSE. I HAVE NACMO LIABILITY WAIVE EMBERS). WARNING PAR1	ACK RIDING IS DANGEROUS AND MIGHT E READ, AGREE TO AND SIGNED (OR MY ER (ON FILE FOR NACMO MEMBERS, TICIPANTS WHO ENGAGE IN EQUINE RESPONSIBILITY FOR INJURY, LOSS, LVANIA LAW.	
Law.	Participant's signature		· · · · · · · · · · · · · · · · · · ·	Ride Date	
Signature of ADULT riding with and supervising		with and supervising Ju	nior Rider:	Ride Date	
For Ride Manager use Or	nly:				
\$ Received f	or Day 1 <i>CK #</i>	(And) \$	Received for Da	ay 2 CK#	
	ing a "guest"? Name of iven a discount entry or		ner?		

Y N Was this rider mentoring a "guest" at this ride?

