



**Wood River Extreme Ski Joring Association, Inc.
REGISTRATION**

Rider Information

Skier Information

Name: _____

Name: _____

Mailing Address:

Mailing Address:

Physical Address:

Physical Address:

Phone: _____

Phone: _____

Email: _____

Email: _____

Horse's Name: _____

Team
Name: _____

Division: (Please check one)

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Open (\$175) | <input type="checkbox"/> Sport (\$125) | <input type="checkbox"/> Womens (\$75) | <input type="checkbox"/> Novice (\$75) |
| <input type="checkbox"/> Snowboard (\$75) | <input type="checkbox"/> Intermediate (\$40) | <input type="checkbox"/> Junior (\$30) | <input type="checkbox"/> PeeWee (\$10) |

* If we only have 2 team entered in any division we reserve the right to combine them and run them as one division*

If a contestant would like to compete only one day they will pay 70% entry fee for open and 50% for all other divisions and only be eligible for any day money paid out not overall standings.

*By signing below I hereby release Wood River Ski Joring Association, Inc and the Associations other insured parties from and all claims or liability which may arise from my participation in this dangerous competition.

*My signature also pledges a competitor's word to the humane treatment of their horse and respectful relationships to all fellow competitors and volunteers hosting this exciting competition.

*My signature below also signifies that I have read and understand all the rules and regulations set forth for this competition and pledge my observation of these rules.

Riders Signature (Parent or Guardian if under 18)

Skier (Parent or Guardian if under 18)

Office Use Only:

Rider Payment Rec'd _____
Cash/Check/CCD Ch# _____

Skier Payment Rec'd _____
Cash/Check/CCD Ch# _____