

**S.M.A.R.T.**  
(Southern Maine Association For Riding Trails)  
P.O. Box 242 South Berwick, Maine 03908  
**TRAIL RIDE ENTRY FORM**

**FORM(S) AND MONEY MUST BE RECEIVED AT SMARTS POST OFFICE BOX NO LATER THAN THE WEDNESDAY PRECEDING THE RIDE TO QUALIFY FOR PRE-REGISTERED PRICES:**

Prices Schedule: Ride & Meal: \$20.00 for Members - \$25.00 for Non-Members. Meal Only: \$10.00.

These are pre-registered prices, which means that **S.M.A.R.T., Inc. must receive your form(s) and money no later than the Wednesday preceding the ride.** The minimum amount for pre-registration is \$10.00; if money is not included with the form, the registration is not going to count. (You can pay the balance the day of the ride.) If you do not pre-register, you are still welcome to come and participate in the ride and meal, but add \$5.00 to the above prices.

**NOTE: IF YOU WANT TO SIT DOWN FOR DINNER, BRING A CHAIR**

Pre-registrations are not accepted over the phone. Proof of Current Negative Coggins required upon request.  
NO DOGS ALLOWED.

**Send form(s) and money to: S.M.A.R.T., Inc., P.O. Box 242, South Berwick, ME 03908.**

Rider's Name: \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

In Case of Emergency, Notify: \_\_\_\_\_ Tel# \_\_\_\_\_

Horses Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Color/Markings: \_\_\_\_\_

Check One please:        Member            Working Member        Non-Member

Check One please:        Ride & Meal            Meal Only

**WAIVER OF LIABILITY**

I understand that involvement with horses can be a dangerous activity. I understand that S.M.A.R.T., Inc. and/or its members, and/or the property owners of land crossed, and/or other riders shall not be held liable for any harm/death/damages to myself or my horse or my property which might occur during this event/trail ride. I certify that the above named horse, which I will ride on this S.M.A.R.T., Inc. trail ride, possesses a current NEGATIVE COGGINS TEST. S.M.A.R.T., Inc. realizes that not everyone is the owner of the horse they ride, however, the rider signed below will be held responsible to confirm/verify existence of Negative Coggins Test of the mount they are riding.

SIGNATURE OF RIDER \_\_\_\_\_ Date \_\_\_\_\_

If Rider is under 18 yrs.

Parents Must Sign Here \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: Mail registration fee and this form to: SMART, Inc; P.O. Box 242; South Berwick, ME 03908**

**IT IS IMPORTANT** to register for a ride or membership, "**one application**" is to be completely filled and submitted "**per person**". Applications with two or more names will not be accepted. All payments according to terms are to be fulfilled and mailed to SMART. No credit or promises of payment will be accepted. **E-mail replies will not be accepted**, we must have payment mailed to us with form(s). If terms are not honored, each person will be held responsible for paying full price for the SMART ride when they attend, no exceptions.

**CHECK LIST:**

DID YOU ENCLOSE YOUR \$10.00 MINIMUM CHECK?  
DID YOU SIGN THE FORM?  
ARE YOU MAILING THIS BY MONDAY?