VERDA Drive and Ride Along



June 16 & 17, 2018 Kedron Valley Stable, South Woodstock, VT

Manager and Secretary: Kathy Callan-Rondeau 802 484-5510

E-mail - kcrvt@icloud.com

Judges: Vet Judge Dr. Lisa Hanelt Lay Judge Toby Bartlett On Call: Vet TBA Farrier Erin Carey

Time: Vetting begins Saturday morning for 50 and 25 miles at 6:30 AM. Saturday 15 and 10 milers can vet in at 7:30 Saturday morning. Sunday 50 and 25 milers will vet in Sunday morning at 6:30 AM. Sunday 15 and 10 milers will vet in starting at 7:30AM. All horses MUST be on site by 7:00 the day of the ride

Location: Kedron Valley Stable, South Woodstock, VT

Trail: The trail will be mostly dirt roads with little woodland trails and pavement.

Farrier: Come well shod and carry an EZ boot. Farrier will be on call at the finish of each day.

Food: Light breakfast offerings, on trail snacks and a light lunch will be provided each day.

Rules: This is an ECTRA sanctioned event. All ECTRA rules and regulations apply. Hay, Shavings,

Manure and garbage must be picked up. Dogs must be under control at all times.

Facilities and Stabling: LIMITED stabling available on a "first come" basis with priority given to 50 milers at \$25.00/ night.VERY limited parking available for trucks and trailers on site. Please travel with a buddy if possible. Additional parking available at Evergreen Equine Clinic 8.6 miles away.Go 8.4miles south on VT Rt 106 turn onto Rt 44 for .2 miles to Evergreen Equine Clinic.

JOIN VERDA for \$25.00 and SAVE on entry fees for all VERDA rides !!!

Entry Fee:	Circle the even	it you ar	e doing	g Ri	ide Dr	ive	
Date	Mileage drive or	ride		Member	Non Me	mber Junio	r
June 16-17	50 mile 2 day			130.00	150.00	30.00)
June 16	25 mile			70.00	85.00	20.00)
June 16	15 mile			55.00	70.00	10.00)
June 16	10 mile			55.00	70.00	10.00)
June 17	25 mile			70.00	85.00	10.00)
June 17	15 mile			55.00	70.00	10.00)
June 17	10 mile			55.00	70.00	10.00)
Stabling requested				25.00	25.00		
		Event	\$		\$	\$	
Pass / Fail Division	Driving pairs add 75% (x .75) \$						
Additional Meals \$10.00 / day \$							

Entry requirements: Negative Coggins test, proof of rabies vaccine and signed waiver of liability is required with entry.

Refunds: All refunds will be made to any competitor if request is made earlier than 24 hours prior to the day of the event.

Make checks payable to VERDA and send to: Kathy Callan Rondeau

217 Baileys Mills Rd. Reading, Vt 05062

VERDA Drive and Ride Along VERDA ENTRY APPLICATION AND RELEASE FORM

Rider	derPhone						
Address	ressEmail						
			Phone				
Address	ddressEmail						
Horse							
AgeSex	Color	Breed	Reg#				
Ride you are entering 2	2 day 50 Sat. 25	5/ 15/10 Sun. 25	/ 15/10				
ECTRA Rider #	Horse #						
VERDA Member? Y	Yes / No Year E	nd Award Candidate? Yes	/ No VERDA Registered Horse? Yes / No				
Rookie Rider? Yes /	No Rookie Hors	e? Yes / No I want to ri	de with				
			or any injury to, or the death of a participant in are obvious and necessary, pursuant to 12V. S. A.				
	A	Agreement to Waiver L	iability				
occur. I agree that if ar against the Vermont (ECTRA), Kedron Val Directors, Trustees, En Directors, Trustees, En damages of whatsoeve charge of such horse claims, suits and expe	ny injury occurs to m Equine Riding and ley Stables any othe apployees or Voluntees mployees, Volunteers r kind or nature that and I agree to inder	ne or my horse or the equipm Driving Association (VERE or organizations or individual rs. I further agree to hold VE and any Land Owners free may be occasioned by the ho mnify and hold harmless the	y dangerous and that serious injury and death carent that I use or send for use, I will make no claim DA), Eastern Competitive Trail Ride Associations associated with the event or any of the Officers RDA, ECTRA, Kedron Valley Stables, the Officers and harmless from any liability, claims, suits of orse used by me or the negligence of the person it organization and individuals against all liability and this liability release.				
Signature			Date				
Must be signed by ever	ry competitor or guar	dian if entrant is under 18 yea	ars of age.				
	(ECTRA) or any dul	ly appointed agent to check for	hereby give permission to The Eastern Competitiv for the possible administration of drugs to my hors				
Signature of Rider/Birthday of Junior							
Signature Horse Ow	ner						
Signature of Parent	or Guardian						