

CSHA REGION 5 HOSTED TRAIL TRIAL
Round Valley Regional Preserve, Brentwood, CA

NAME: _____.

Address: _____.

Phone Number (_____) _____.

Email Address: _____.

In case of emergency notify: Name: _____ . Phone (_____) _____ .

Juniors 17 years and under must be accompanied by an adult rider.
(JUNIORS ONLY) Name of adult rider responsible for the day. _____.

Are you a CSHA TRAIL TRIALS MEMBER? _____. Region _____.
If not, would you like information on how to become a program member? SURE! No Thanks.

Name of Horse _____.

In order to disperse the riders throughout the morning and aid in the forward progress of the ride, please choose a preferred time to start your ride. If necessary, we will call you to reschedule your time.

9:30 _____ 10:00 _____ 10:30 _____ 11:00 _____

Category: Advanced _____ Intermediate _____ Novice _____

Division: Junior (17 & under) _____ Adult 18-49 _____ Senior 50+ _____
(First time Trail Trial participants are encouraged to select Novice for their first ride.)

Program members: The points gained at this ride will accumulate under your appropriate age group and division at the regional level.

Registration Fees:	\$37 Adult	\$ _____
	\$12 Junior	\$ _____
	\$10 Companion Rider	\$ _____
State Trail Trial Fee (CSHA)	\$ 3 (waived for companions)	\$ _____
Drug Testing Fee (State required)	\$ 5 (waived for companions)	\$ _____
Home made Chile Lunch	\$10 x _____ people	\$ _____
Late Registration Fee (After 6/06/09)	\$ 5	\$ _____

TOTAL ENCLOSED \$ _____

NO REFUNDS FOR CANCELLATIONS AFTER JUNE 8, 2008

Checks should be made payable to CSHA Region 5 and sent to:
Barbara Boehme, 714 Bonita Ave, Pleasanton, CA 94566

Please fill out and return **BOTH** the Release Form and Registration form.

Office Use Only: Date Rec'd _____ . Amt _____ Ck# _____ . Paid _____ . Release _____ . Refund _____ .