

WARRIORS TRAIL TRIALS

CSHA Region 4
Sunday . March 26, 2023



“A Trail Trials consists of a ride with approximately 10-12 judged natural obstacles that appear along a trail of several miles in parks or private property. This is not an arena event.”

Horses of Warriors 17820 Seco Rd Jamestown, California

Directions from Hwy 99 in Manteca

- . Take Hwy 120/108 east towards Sonora
- . Use caution when maneuvering roundabout on Hwy 108
- . Veer Right onto Main St in Jamestown
- . Right onto Donovan (first street)
- . Right onto Seco Rd
- . Horses of Warriors HOW on right. DO NOT cross the RR tracks
- . Follow signs to the staging and camping area.

There is an ARCO AM/PM station in Oakdale for last minute ice, gas/diesel, etc.

~ ~ ~ ~ ~

Ride Managers: Amanda Foiles 623-521-4304 or Carlana Kellogg 209-505-0122
Senior Judge: Maria Hines

There is dry camping parking plus room for portable pen or trailer picket line/hi tie.
Dogs must be on a leash or contained at your trailer.
Water is available, but bring hoses. PLEASE! No hosing or washing horses.
We will be on our own for meals.

Pre-entries will have priority ride times, so get them in early to secure your preferred times.
We will have check-in available Saturday between 5pm and 7pm for early arrivals.

Sunday ride is approximately 5 miles with 8-9 obstacles. Ride Out begins @ 9:30am

PROJECTIONS PHOTOGRAPHY WILL BE OUR OFFICIAL PHOTOGRAPHER !

Daily low point awards 1st through 3rd place, ribbons or horse treats 4th through 6th place.
Overall Low Point awards in each division: Novice, Intermediate, and Advance.

Raffle before awards. Please consider donating a new or gently used item for the Raffle.

More event info: www.trailtrials.com



WARRIORS TRAIL TRIAL JAMESTOWN



March 26, 2023, 2023

A Trail Trials consists of a ride with approximately 10-12 judged natural obstacles that appear along a trail of several miles in parks or private property. This is not an arena event!

Rider: _____ Horse: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Are you a CSHA Member? ____ Are you a TT program member? ____ Region: ____

DIVISION (Circle One)

NOVICE INTERMEDIATE ADVANCED SCHOOLING COMPANION

AGE CATAGORY (Circle One)

JUNIOR ADULT (18-59) SENIOR (60+)

Select Ride Out Time (approximate time, verify when registering at event)

9:30 9:45 10:00 10:15 10:30 10:45 11:00 11:15 11:30 11:45 12:00 12:15

Friends you are riding with: _____

Entry Fees:

Competitive Rider

Sunday \$50 \$ _____

Junior Competitive Rider***

Sunday \$25 \$ _____

Schooling Rider (judged, no awards)

Sunday \$25 \$ _____

Companion Rider (trail ride, no obstacles)

Sunday \$15 \$ _____

Camping Fee (per rig on the property, Saturday night only)

\$10 \$ _____

Drug Fee for weekend (for competitive riders)

\$ 14.00

TOTAL FEES: \$ _____

If you are a junior rider, give the name of your responsible adult _____

***If you are a registered Junior in the Trail Trials program, your entry fee is waived

Cancellations graciously accepted, just call to cancel and we'll destroy your check.

Mail to: Kacie Powell 17130 Monte Grande Dr. Soulsbyville, CA 95372 Checks written to: Region 4

Questions: call or text Kacie @ 209-470-1143



California State Horsemen's Association, Incorporated
RELEASE OF LIABILITY

PARTICIPANT: _____ PHONE/Cell# _____

ADDRESS: _____

CITY: _____ ZIP: _____ STATE: _____

I acknowledge I am attending and/ or participating in an event which carries inherent risks of injury and/or damage to myself, my horse, and/ or my property. I knowingly assume all risks, whether known or unknown of these activities.

I hereby agree I will indemnify and hold harmless **California State Horsemen's Association, Incorporated,** and _____ or any of its agents and the land and business owners/controllers on whose property I participate from all liability for any act of negligence or want of ordinary care on the part of **CSHA, Inc.,** and _____ or any of its agents; to include actual attorney fees arising from any proceedings or lawsuits brought by or prosecuted on my behalf.

In consideration of my participation in events organized or sponsored by **CSHA, Inc,** and _____

I waive, release and discharge, their directors, officers, agents, and members, their representatives, heirs, executors and assigns from any and all claims of liability for injury or damage to myself, my animals, or my property arising out of my participation; this is binding upon my executors, heirs and assigns.

() I acknowledge that I have read this Release of Liability; know and understand its contents and the rules and requirements for CSHA events.

() I, the undersigned parent or guardian of the above participant in consideration of my minor's attendance/ participation in the event, agree that the terms and conditions of this Release of Liability and understand the rules and requirements for CSHA events. This shall be binding as to damage or injury the my minor, his/her animals or property arising out of his/her attendance/ participation in events.

NAME: _____ TELEPHONE: () _____

ADDRESS: _____ CITY _____ ZIP _____

Signature: _____ Date: _____