



LAKESIDE FRONTIER RIDERS



ANNUAL POKER RIDE



Saturday - November 5, 2016 - Ride the "River Bottom"

Staging @ Tumbleweed Arena - 13315 Willow Rd, Lakeside

\$150 FIRST, \$75 SECOND, \$50 THIRD PLACE CASH PRIZES

SILENT AUCTION ITEMS & GREAT RAFFLE PRIZES AVAILABLE

Come join us for an Enjoyable, Easy Six-Mile Ride in the Lakeside River Bottom. BBQ Lunch, dessert, and drinks provided after the ride, served 11:00 to 12:30 pm. Silent Auction items and Raffle prizes will be drawn at 12:30 pm. Raffle tickets are \$1/each or \$5 for six. All riders under 18 must wear a helmet.



Check-in starting @ 8:00 a.m. – First Riders Out @ 9:00 a.m.

Directions: Turn East on Willow Rd. from Hwy 67. Go approx. 1.2 miles through intersection of Ashwood/Willow; the arena is down one block on the right. For any questions, call 858 442-4847 or lakesidefrontierriders@gmail.com. For additional Registration & Release Forms please go to www.lakesidefrontierriders.com.

This form with payment must be postmarked by October 28, 2016 for the pre-registration price of \$25. On-site registration is \$35. There will be a limited number of riders so Pre-Register to Guarantee a Spot!!

For pre-registration please fill out this form and put in the mail/postmarked by October 28, 2016.

_____ Poker Ride (includes lunch & 1 poker hand) @ \$25 \$_____

Make check to/Mail to:

_____ On-site registration @ \$35 \$_____

_____ Lunch @ \$10 \$_____

Lakeside Frontier Riders

_____ Extra poker hand(s) @ \$5/each \$_____

PO Box 572

_____ Raffle tickets @ \$1 each or 6 for \$5 \$_____

Lakeside, CA 92040

Total enclosed: \$_____

Name(s) _____

Address _____ phone _____

_____ email _____



LAKESIDE FRONTIER RIDERS
PO BOX 572 LAKESIDE, CALIFORNIA 92040

RELEASE OF LIABILITY AND ASSUMPTION OF RISK

Separate Release Required for Each Person (whether riding or not)

I, _____, the undersigned, acknowledge that horseback riding and horse-related activities are inherently dangerous and I expressly assume the risks of injury or damage to me, my horse, and my property. I am voluntarily participating in these activities with full knowledge of the danger and risks involved. I expressly warrant and certify that I assume all risks of such dangers and injuries. I hereby forever discharge, release, indemnify, and hold harmless the Lakeside Frontier Riders Elected Officials, Board Members and their Members, Helix Water District, D.I.S. PARTNERS LLC, Tumbleweed Arena, all other neighboring premises, and any and all of their respective officers, directors, owners, agents, volunteers, employees, representatives, heirs and assigns, from all claims, demands, and/or causes of action, including court costs and attorneys' fees, directly or indirectly arising from any action or other proceedings, whether the same be known or unknown, anticipated or unanticipated. I further expressly agree not to bring any claims, demands, legal actions and/or causes of action against the Lakeside Frontier Riders Elected Officials, Board Members, and their Members, Helix Water District, D.I.S. PARTNERS LLC, Tumbleweed Arena, and all other neighboring premises, and any and all of their respective officers, directors, owners, agents, volunteers, employees, representatives, heirs and assigns, insurers, and all others acting on their behalves.

My signature below certifies that I have carefully read this Release of Liability and Assumption of Risk, I understand it, and I agree to comply with all of its terms and provisions

MINOR CHILD PARTICIPANT:

I agree for me and on behalf of my minor child whose full name is _____ and whose birth date is _____ to assume all risks, to indemnify, release, and hold harmless from and not to bring any claims, demands, causes of action and legal liability against the Lakeside Frontier Riders, all other neighboring premises, and any and all of their respective officers, directors, owners, agents, volunteers, employees, representatives, heirs and assigns, insurers, and all others acting on their behalves.

This Release of Liability and Assumption of Risk shall be governed by the laws of California. Executed at _____ (city, state), on _____ (date).

Participant's Name

Participant's Signature

Name of Parent or Guardian

Signature of Parent or Guardian