NEW JERSEY TRAIL RIDE ASSOCIATION, INC.
MUSTANG MEMORIAL Intro/30/50/75# October 4th, 2025

CIRCLE AERC EVENT: Intro 30mi 50mi 75mi

PLEASE PRINT CLEARLY BELOW

Rider Name_____ Horse Name_____

Email (print) _____

Address _____ City _____State_____

Zip_____ Phone (_____)_____

Breed:_____ Breed Registration #: _____ Association Affiliate:_____

Rider AERC #_____ Horse AERC#_____ NJTRA Member YES / NO (Circle One)

Rider WT Division_____ ECTRA Rider#_____ Horse ECTRA#_____

Owner (If not rider) _____ Owner Phone (___) _____

Owner Address _____ City _____State _____Zip_____

SENIOR / JUNIOR (Please Circle One) If Junior, age as of Oct 4th, 2025_____

Expected Day/Time of Arrival_____ Day of Departure_____

PAYMENT IN FULL is required for each ride entry and must be postmarked by Sept. 27, 2025, anything after this date, includes a $50 late fee added to amounts below. Make checks payable to NJTRA or utilize Zelle QR code at the end of this entry.

REFUNDS- No refunds after 9/27/2025. Any refunds will be processed after the ride is completed, minus a $50 fee.

Circle Event	INTRO	AERC 30	AERC 50	AERC 75
NJTRA MEMBERS	$145	$165 Sr	$165 Sr	$250 Sr
NON-NJTRA MEMBERS	$160	$180 Sr	$180 Sr	$265 Sr
JUNIORS/ YOUNG RIDERS	HALF PRICE	HALF PRICE	HALF PRICE	HALF PRICE

#75mile will only be offered if we have 10 riders or more!!
ALL RIDERS MUST SHOW A 2025 AERC MEMBERSHIP CARD

COGGINS/RABIES: Proof of 2025 Coggins and current **Veterinarian** Rabies Certificates within 12 months of the ride date. All horses must have a rabies certificate!

REQUIRED/ NO EXCEPTIONS. All companion animals must have proof of current rabies vaccination!

Entry Fees from above			$
Add $5.00 if AHA member if entering AHA ride			$
Add $20 if you are **not** an AERC member			$
Add $10/day per rig for camp if arriving PRIOR to Oct 3rd (no hook-up)	#		$
Panel Rental - $10 ea (Note number of panels/which night(s) required.)	#		$
Extra Meals - $15 ea (Note the number of meals)	#		$
LATE FEE OF $50 if entry is not postmarked by Sept 27, 2025			$
Total			$

ENTRY PACKAGE CHECKLIST:

ITEM	COMPLETED
First page of entry completed in full (All BLANKS filled in, including N/A)	☐
Panels indicated	☐
AERC Member Indicated	☐
AHA Member Indicated	☐
Signed Liability forms - all applicable signatures (including crew)	☐
Emergency Contact Information	☐
Copy of Coggins	☐
Copy of Equine Rabies	☐
Copy of Canine Rabies (if bringing a dog)	☐
Zelle payment or Check made payable to NJTRA	☐

Send Entry to Ride Secretary:

A CHECK MADE PAYABLE TO NJTRA, INC. or ZELLE payment

Mail to Ride Sec. Maile Irion
Email: endurancenj@gmail.com
Phone: 609-351-2434
Address: 206 Ridge Road, Southampton, NJ 08088

Scan in your banking app to pay

NJ

NEW JERSEY TRAIL RIDE ASSOC

(***) ***-4518

Zelle

LIABILITY RELEASE FORM

NJTRA MUSTANG MEMORIAL AERC 12/30/50/75

October 4th, 2025

PLEASE READ CAREFULLY AND SIGN THE FOLLOWING RELEASE:

The undersigned, in consideration of accepting this entry, does hereby, for himself, his heirs, executors, and administrators, waive and release the NEW JERSEY TRAIL RIDE ASSOCIATION, INC. and all individual members thereof, the EASTERN COMPETITIVE TRAIL RIDE ASSOCIATION, AMERICAN ENDURANCE RIDE CONFERENCE, and all other persons regardless of their capacity in any way connected with the event described herein, their representatives, heirs, executors, administrators, and assigns from any and all right, claim or liability for damages or for any and all injuries and death that may be sustained by me including injuries and death to animals, or from any and all claims of any kind or nature that I might have. Further, I do hereby acknowledge that said release will extend to any accidents, damages, or claims arising out of my entry caused by my own act or the acts of anyone or any animal within my control. Management reserves the right to deny entry to any of its events.

RIDERS UNDER AGE OF 18 MUST COMPLETE THE FOLLOWING AND HAVE SIGNED BY PARENT OR GUARDIAN:
Riders aged 11 years and under must ride with their senior sponsor throughout the entire ride and must withdraw from the ride if the senior sponsor withdraws, unless a replacement from the open division is found.

AGE _____BIRTH DATE_____ SPONSOR_____

WARNING: UNDER NEW JERSEY LAW, AN (EQUINE) EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR DEATH OF A PARTICIPANT IN EQUINE 'ANIMAL' ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ‘ANIMAL’ ACTIVITIES, PURSUANT TO PL1997, CHAPTER 287, SENATE NUMBER 282 APPROVED JANUARY 8, 1998.

All riders, drivers, and grooms are required to wear a protective ASTM/SEI certified equestrian helmet meeting standard F11.63 with fastened chin strap throughout the ride. I do acknowledge that I have read the foregoing paragraph and know and understand the contents thereof and agree to abide by all rules and regulations of the ride sponsored by the NEW JERSEY TRAIL RIDE ASSOCIATION, INC, the EASTERN COMPETITIVE TRAIL RIDE ASSOCIATION, and the AMERICAN ENDURANCE RIDE CONFERENCE.

I consent to drug testing requirements according to NJTRA/ECTRA/AERC regulations and at the discretion of NJTRA, INC. Ride Management.

RIDER’S SIGNATURE _____ DATE _____

CREW SIGNATURE _____ DATE _____

OWNER’S SIGNATURE _____ DATE _____

PARENT’S SIGNATURE _____ DATE _____
(Required for all riders under the age of 18)

EMERGENCY CONTACT PERSON (NOT AT THIS EVENT)

Name:_____Phone:_____

TO SECURE PLACEMENT IN THIS EVENT, PLEASE COMPLETE THIS FORM IN ITS ENTIRETY (2 pages including Liability Release Form) AND ENCLOSE 2025 COGGINS, 12 MONTH RABIES