



WESTERN STATES TRAIL FOUNDATION  
150 Gum Lane, Suite 103, Auburn, CA 95603  
Telephone: (530) 823-7282 Fax: (530) 823-7901  
Email: [wstf@teviscup.org](mailto:wstf@teviscup.org) Web: [www.teviscup.org](http://www.teviscup.org)



**59<sup>TH</sup> ANNUAL WESTERN STATES TRAIL RIDE**  
**Tevis Cup "100 Miles One Day"**  
**August 9, 2014**

## **RIDE ENTRY FORMS**

**Traditional Ride Entry:** \$400.00 fee which includes drug testing, Robie Park camping, one ticket to the Friday Night Dinner, and one ticket to the Sunday Awards Banquet. First time finishers may choose to receive a Legacy Buckle for no charge. Complete pages 1-4 of the application. Award buckle is \$150.00 when reserved pre-ride and is nonrefundable. Buckles are \$199 when purchased post ride.

**Signature Ride Entry:** \$1,500.00 fee which includes traditional ride entry plus a generous donation to the Western States Trail Foundation. This entry package includes a buckle upon completion of the ride, a Signature Entry jacket and horse sheet, an invitation to the VIP/Foreign Rider dinner, Wednesday evening barbeque, reserved seating at the Sunday Awards Banquet, two nights of stabling for your horse, Easyboots, and additional items. To make the weekend more relaxed, the Signature Rider also receives CalStar helicopter insurance for the weekend and parking assistance at the Robie Park ride camp and Foresthill vet check. Signature Entries are limited to 15 riders. Please complete pages 2-6 of the application.

**Junior Entries** are free to the first ten juniors who enter with an adult sponsor. EasyCare's generosity makes it possible for this program, which includes a Legacy Buckle for first time junior finishers, to be offered again in 2014. Complete pages 1-4.

### **Horse Stabling in Auburn – Page 3 of the Application**

**Horse Camping** is available at the south end of McCann Stadium and the Fairgrounds at no charge. Portable pens may be set up. Space in these areas is limited.

**Stalls and Paddocks** may be reserved at the Fairgrounds from Thursday, August 7<sup>th</sup>, through Sunday, August 10<sup>th</sup>, for \$65.00. Additional nights are \$25.00 each. Only one horse per stall or paddock is allowed. Please complete information on the Stall Reservation section of this application.

**North Lot Camping with horses** is available next to the Tevis Office. The fee is \$20.00 per night with a two-night (Friday & Saturday) minimum. The camping spots are limited in number and should also be reserved with this application. Portable pens are allowed and must fit within your allotted space.

**Entry fees must be included with application to be considered. Qualification requirements must be met before submission of the entry form.**

**We look forward to seeing you in August on the Western States Trail.**



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<i>OFFICE USE ONLY</i>	
Date Received	
Sequence Number	
Rider Number	
Legacy Buckle	

**59<sup>TH</sup> ANNUAL WESTERN STATES TRAIL RIDE**  
**Tevis Cup "100 Miles One Day"**  
**Application for Entry --August 9, 2014**

Rider Information: Please PRINT clearly! Note: All applicants must meet Ride qualifications. See page 2 for details.

Last Name	First Name & Middle Initial	Gender	Birth Date (Mo/Day/Yr)	AERC No.
Mailing Address	City	State	Country (if not USA)	Zip Code
Primary Telephone ( )	Alternate Telephone ( )	Email		

**Junior Rider Information:** Required for riders under 18 years old on the day of the Ride. Both the junior and the sponsor must be qualified. The first 10 qualified junior rider entries received will have entry fees paid under the Junior Rider Program. The sponsor's entry must accompany the junior's entry.

Jr. Birth Date (Mo/Day/Year)	Full Name of Parent/Guardian (Parent/Guardian <b>MUST</b> sign Liability Release on page 4)
Sponsor's Full Name (Sponsor must be 21 years or older on Ride Day)	
Sponsor's Age	<b>Sponsor Certification:</b> I have read and understand the rules/guidelines related to sponsoring a Junior Rider in this event and certify that I am qualified to act as this Juniors sponsor. Please sign & date.  (Date)

Sequence #

**Horse Information:** (A \$25.00 Fee will be collected for horse changes made after August 1, 2014, including changes at Ride Check-in)

Horse Registered Name	Nickname	AERC Number	Owner (If different than rider) Last, First Name		
Gender (Circle one) Gelding Mare Stallion	Breed	Horse DOB Mo/D/Yr	Color	Height	Approx. Weight
<b>Stall Reservation @ Auburn Fairgrounds</b> (See Page 3) ARRIVAL DATE :	DEPARTURE DATE:	No. of nights	Total Stall Fee**	<u>Initial if a stall is NOT wanted</u>	
<b>Parking at North Lot at Auburn Overlook</b> \$20 per night with a two-night (Friday & Saturday) minimum (See Page 3)	Arrival Date: Departure Date:	# of Days @ \$20 each: \$ _____	Enter Total Fees for North Lot below **	<u>Initial if a North Lot space is NOT wanted:</u>	

**Entry Fees:** Must be postmarked or received by stated dates

Ride Entry Fee on/before July 12, 2014	\$ 400.00
Ride Entry Fee subtotal on/after July 13, 2014	\$ 500.00
Legacy Buckle: <b>First Time Finishers Only</b> Yes No	\$ 0.00
Tevis Buckle Pre-ride (nonrefundable)	\$ 150.00
<b>Sub Total (enter fee here based on the DATE)</b>	\$

**Additional Items:**

<b>Sub Total (basic fee posted here is based on date)</b>	\$
Additional Meals:	
Friday Night Robie Park # _____ @ \$15 each	\$
Sunday Awards Banquet in Auburn # _____ @ \$15 each	\$
**Stall or Camping Reservation Fees (see above)	\$
<b>Total Amount Due with Application</b>	\$

**Refund Policy:** Ride entry withdrawal requests received at the Tevis office **on/before July 26, 2014** (and horses pulled at check-in) will receive a refund, less a \$30 non-refundable administrative fee, 30 days post ride. No refunds for withdrawals **after July 26, 2014** or for no shows. Horses unable to start because of injury or sickness occurring **on/after July 26, 2014** and fully documented by a vet, may receive partial refunds at the discretion of ride management. Deadline for refund of stall reservations is **on/before July 26, 2014**.

**Method of Payment** (Checks are preferred)

<b>Check</b> (Make Payable to WSTF)	Check #	<b>Money Order</b> (Make MO Payable WSTF)	MO #
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card	<b>Credit Card Number</b>	Security code on Back	Expiration Date
Print Name (as it appears on the card)		Card Holder Signature	

**Office Use Only**

Rider Cancel Date	Entry Refund	Administrative Fee -\$30	Optional Refund	Stall Refund	Total Refund	Legacy Buckle Yes No	Date Refunded
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**Statement of Qualification  
(PRE-QUALIFICATION IS REQUIRED)**

To qualify to enter the Tevis, Riders (not the equine) must, at the time of application, meet one of the qualifications below. The 300 miles are cumulative lifetime. Equine must be a minimum of 72 months (6 years) old at time of ride.

I have previously completed the Western States Trail Ride. Number of Tevis Completions \_\_\_\_\_. My most recent year of completion was \_\_\_\_\_.

-- or --

I have completed a total of 300 miles of rides sanctioned by WSTF, AERC, NATRC, and/or a foreign/international equivalent. All the rides except those sanctioned as Education Rides by WSTF were 50 miles or more in length. (Note: You may count toward the required 300 miles, 75 miles for each day that you have completed on a WSTF Education Ride up to a maximum of 150 miles.)

I certify that the above information is verifiable in the records of the sanctioning organization(s). I understand that if this information is found to be in substantial error, my Ride completion may be rescinded, and I may be barred from participating in the Western States Trail Ride in the future.

Signature of Rider \_\_\_\_\_ date: \_\_\_\_\_

Signature of parent or guardian (If Rider is a Junior) \_\_\_\_\_ date: \_\_\_\_\_

**This form can also be found on our website, along with the Western States Trail Foundation Ride Rules, Medication Policy, Junior Sponsorship Rules and Guidelines for Riders: [www.teviscup.org](http://www.teviscup.org)**

**RIDE POLICIES**

1. Rules governing the WSTF differ in some respects from those of other AERC sanctioned rides. The WSTF Rules will be applied and adhered to before, during and after the Ride. The Ride rules are available on the WSTF website ([www.teviscup.org](http://www.teviscup.org)) or may be requested from the WSTF office ([wstf@teviscup.org](mailto:wstf@teviscup.org)). Please read them carefully.
2. Receipt of a completed entry by the WSTF does not guarantee acceptance to the ride.
3. When the quota has been reached, further entries will be placed on a waiting list. Ten additional entries in the Rider List are discretionary and are generally accorded to foreign riders.
4. Applications by junior riders who are over 12 and under 18 on ride day will only be considered if accompanied by the entry of an adult rider (21 years or older) as sponsor.

**SEEDING INFORMATION**

**The start for the 2014 Tevis will again be seeded.**

If you want to be *considered* for seeding in Pen 1, you must submit the supplemental "Seeding 2014" form (a sample of a portion of the form is shown below) to the Tevis office no earlier than **July 1, 2014** and no later than **July 18, 2014**. The form is currently available on the [teviscup.org](http://teviscup.org) website.

**Failure to complete this form in full will automatically place you in Pen 2 (no exceptions).**

To be seeded, you must supply your record on the entered horse for the period of

**January 1, 2013 through June 30, 2014.**

Name of Rider: \_\_\_\_\_

Name of Horse: \_\_\_\_\_

Date of Ride	Name of Ride	Number Started	Placing	Placing % (Divide Placing by # of Starters)
Sample				

If the rider has not ridden the entered horse between January 1, 2013 and June 30, 2014, then please supply the following information for the entered horse.

Name of Horse: \_\_\_\_\_

Date of Ride	Name of Ride	Number Started	Placing	Placing % (Divide Placing by # Starters)

Name: Last \_\_\_\_\_ First \_\_\_\_\_

Office use only  
Sequence Number \_\_\_\_\_

**STALL RESERVATION 2014**  
FOR ADDITIONAL INFORMATION AND INSTRUCTIONS SEE WEBSITE [www.teviscup.org](http://www.teviscup.org)

**STALL RESERVATION** (Circle your expected arrival date at the Gold Country Fairgrounds)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
August 3 \$165.00	August 4 \$140.00	August 5 \$115.00	August 6 \$90.00	August 7 \$65.00 --->	August 8 Included in \$65	August 9-Ride Day Included in \$65
August 10 <--Included in \$65	August 11 + \$25.00	August 12 CONTACT----->	August 13 Gold	August 14 Country	* August 15 Fairgrounds	August 16 ←-----CONTACT

\* For reservations before Aug 3<sup>rd</sup> or after Aug 15<sup>th</sup> (Post Ride and thereafter) – Contact the Gold Country Fairgrounds 1273 High Street, Auburn, Ca. 95603, P (530) 823-4533

Arrival Date: \_\_\_\_/\_\_\_\_/2014    Departure Date: \_\_\_\_/\_\_\_\_/2014    Number of days: \_\_\_\_\_    Amount Due \$ \_\_\_\_\_

PLEASE ENTER THE ARRIVAL/DEPARTURE DATES, NUMBER OF NIGHTS AND THE AMOUNT DUE ON THE FRONT PAGE, UNDER STALL RESERVATIONS AND IN ADDITIONAL ITEMS. INCLUDE THE AMOUNT DUE IN YOUR RIDE APPLICATION FEES.

**STALL PREFERENCE**

**Reserved stalls are first come, first served.**

Check our website for a map of the stall layout Stall Preference (Check All that Apply) <input type="checkbox"/> Any Covered Paddock <input type="checkbox"/> Any box Stall <input type="checkbox"/> Live Stock 1 <input type="checkbox"/> Live Stock 3 <input type="checkbox"/> Barn B <input type="checkbox"/> Live Stock 2 <input type="checkbox"/> Live Stock 4  Equine Gender (circle one)    Gelding    Mare    Stallion	Specific Requests (Stall location or near other riders, etc.)
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**EMERGENCY INFORMATION**

This information **MUST BE UPDATED** by Rider/Crew as necessary on Stall Cards in case of an emergency!  
(This equine safety information is a **MUST** when an equine is at Gold Country Fairgrounds!)

**Lodging location/address for rider and crew:**

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**Emergency Contact Information:** Please provide information for primary and alternative contact persons who may be notified in case of emergency

Rider's Primary Phone # (\_\_\_\_\_) \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_ Primary Phone # (\_\_\_\_\_) \_\_\_\_\_ 2nd Phone # (\_\_\_\_\_) \_\_\_\_\_

Name of Second Contact: \_\_\_\_\_ Primary Phone # (\_\_\_\_\_) \_\_\_\_\_ 2nd Phone # (\_\_\_\_\_) \_\_\_\_\_

**CAMPING IN THE NORTH LOT AT THE AUBURN OVERLOOK IS AVAILABLE FOR LARGE RIGS.**

Parking at North Lot at Auburn Overlook \$20 per night with a two-night (Friday & Saturday) minimum Check our website for a map of the parking layout	Specific Requests (ie: near other riders)
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**ADDITIONAL INFORMATION**

- The number of stalls is limited. Reserved stalls are assigned on a first come first serve basis. This is based - first on the order of receipt, second - by stall preference. Request to be near another rider/horse (s) will be based on the **LATEST** receipt date. **STALL AVAILABILITY IS DESIGNED TO PROVIDE A SERVICE TO THE ACTIVE PARTICIPANT AND HIS/HER MOUNT. Hint – if you would like to be near a fellow rider/horse, mail your Ride Applications in together and as early as possible.**
- If no preference is checked, ride management will make your stall assignment.
- All Stallions will be assigned a box stall in a horse barn.
- Payment for stall reservation and North Lot camping is required at time of ride application.



**WESTERN STATES TRAIL RIDE**  
**August 9, 2014**  
**ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL LIABILITY**



1. **ACKNOWLEDGEMENT OF RISK:** I am aware that the Western States 100 Mile Trail Ride is considered by many to be the most difficult and demanding endurance ride in the world and should only be attempted by riders who have ridden multiple endurance rides before attempting this one. The ride is difficult and hazardous for even experienced and well-conditioned horses and experienced healthy riders under the most favorable of conditions. I have been warned that I should not participate in this event unless: a) I have met the required qualifications and b) prior to Ride day I have ridden a horse in the dark. I represent by signing this ACKNOWLEDGMENT OF RISK AND RELEASE OF ALL LIABILITY that my horse and I meet or exceed these minimum experience requirements.

*Initials:* \_\_\_\_\_

**I FURTHER RECOGNIZE AND ACKNOWLEDGE THAT THIS IS A RISKY SPORT AND I AM FULLY AWARE AND ACCEPT RESPONSIBILITY FOR ALL THE RISKS AND DANGERS INHERENT IN THIS ACTIVITY:** Including, but not limited to risks associated with stabling and transporting horses and risks from natural conditions, including wildlife such as rattlesnakes, bears, and mountain lions, hazards caused by the negligence or incompetence of other riders or their failure to control their mounts, hazards of vehicular traffic, narrow precipitous trails in remote wilderness areas, risks of injury from falling, altitude sickness, overuse, fatigue, dehydration, getting lost, exposure to elements and falling rocks and trees. These are only some of the risks. I understand that there is no way for Ride Management to anticipate, identify, modify or eliminate all risks nor has Ride Management undertaken to do so. I further understand that if in fact my horse or I become injured or incapacitated, it may be difficult or impossible to get required medical or veterinary aid to me or my horse in time to avoid additional physical injury or even death.

*Initials:* \_\_\_\_\_

2. **ASSUMPTION OF RISK:** With full awareness of the above stated risks and all risks not stated I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK of personal injury including permanent disability and death to myself and all risk of injury or loss to my horse sustained while participating in this event including the risk of passive or active negligence on the part of the released parties.

*Initials:* \_\_\_\_\_

3. **RELEASE OF LIABILITY:** With full awareness of the above stated risks and all risks not stated and in consideration of my being allowed to participate in this event, I, on behalf of myself, my heirs, executors and administrators, and anyone claiming through me hereby **FOREVER RELEASE AND DISCHARGE** the Western States Trail Foundation and the Officers, Directors, and/or members, agents, and employees of each, and all medical, veterinarian and other personnel assisting with the event or any of them and any other person assisting with this riding event including any public or private land owners over whose property the Ride passes, their representatives, successors and assigns, **FROM ANY AND ALL CLAIMS OF LIABILITY FOR DAMAGE FOR ANY AND ALL INJURIES TO ME, MY HORSE, OR PROPERTY, ARISING OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THIS EVENT.**

*Initials:* \_\_\_\_\_

4. **AGREEMENT TO INDEMNIFY AND HOLD HARMLESS:** In further consideration of being allowed to participate in this event, I agree that I WILL DEFEND, INDEMNIFY AND HOLD HARMLESS, the Western States Trail Foundation and the officers, directors, members, agents, of each, against all claims, demands and causes of action, including Court costs and attorney fees, directly or indirectly arising from any action or other proceeding brought by or prosecuted for my benefit contrary to this agreement.

*Initials:* \_\_\_\_\_

5. **CERTIFICATION OF ABILITY AND AGREEMENT TO ABIDE BY RIDE RULES:** I certify that I have the necessary skills and ability to participate in the Western States 100 Mile Ride and I acknowledge that I will read the 2014 Western States 100 Mile Ride Participants Guide and I further agree to abide by all rules and instructions given to me either verbally or in writing by the Western States Trail Foundation.

*Initials:* \_\_\_\_\_

6. **MEDIA RELEASE:** I hereby grant irrevocable permission to the Western States Trail Foundation, and any media covering the event, and the authorized agents, contractors and representatives of each, to use my name and likeness in any photographs, videotapes, motion pictures, recordings or any other records of my participation in this event for any purpose.

*Initials:* \_\_\_\_\_

7. **WAIVER OF RIGHTS:** It is further understood and agreed that this event is a non-professional, amateur sporting event. It is conducted by an all volunteer board solely for the enjoyment of the participants, their friends, their families, and spectators. Any competitor who believes that he/she may have any direct or indirect financial interest in the outcome of the Ride; in his/her participation in the Ride; in his/her completion of the Ride; in his/her failure to complete the Ride; in his/her disqualification during the Ride or, as a result of sanctions imposed against him/her following the Ride for any reason whatsoever; hereby expressly and irrevocably waives his/her financial interest. Participants are expressly advised that, but for their agreement to this waiver provision, they or their agents or assigns may have various legal or equitable causes of action against various groups or individuals involved with the conduct of the Ride. In executing this paragraph of the ACKNOWLEDGEMENT OF RISK AND RELEASE OF ALL LIABILITY form, the participant expressly surrenders his/her right to seek monetary damages from any group or individual directly or indirectly involved with the conduct of the Ride and further agrees that any damages of any sort which otherwise might be alleged shall not exceed the liquidated sum of One Dollar (\$1.00).

The participant further waives his/ her rights under California Civil Code Section 1542 which states: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

This waiver therefore applies to all potential claims for damage whether known or unknown, suspected or unsuspected.

*Initials:* \_\_\_\_\_

I ACKNOWLEDGE THAT I HAVE READ/UNDERSTAND AND I ACCEPT THE TERMS AND CONDITIONS STATED HEREIN AND I UNDERSTAND AND ACKNOWLEDGE THAT THIS AGREEMENT SHALL BE EFFECTIVE AND BINDING UPON ME AND ANYONE CLAIMING THROUGH ME AND EFFECTIVELY BARS MY RIGHT TO CLAIM DAMAGES OF ANY KIND INCLUDING INJURIES OR EVEN DEATH ARISING FROM MY PARTICIPATION IN THIS EVENT.

I certify under penalty of perjury that I have provided true and complete information concerning my health and qualifications.

\_\_\_\_\_  
 Rider Name (print)

\_\_\_\_\_  
 Signature of Rider  
 or of Parent/Guardian of A Junior Rider

\_\_\_\_\_  
 Date



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**OFFICE USE ONLY**  
 Date Received  
 Sequence Number  
 Rider Number  
 Legacy Buckle  
 Signature Entry

**59<sup>TH</sup> ANNUAL WESTERN STATES TRAIL RIDE**  
**Tevis Cup "100 Miles One Day"**  
**APPLICATION FOR SIGNATURE ENTRY**  
**August 9, 2014**

*Signature Entry*

**Rider Information:** Please **PRINT** clearly! **Note:** All applicants **must** meet Ride qualifications. See page 2 for details.

Last Name	First Name & Middle Initial	Gender	Birth Date (Mo/Day/Yr)	AERC No.
Mailing Address	City	State	Country (if not USA)	Zip Code
Primary Telephone ( )	Alternate Telephone ( )	Email		

**Junior Rider Information:** Required for riders under 18 years old on the day of the Ride. Both the junior and the sponsor must be qualified. The first 15 qualified junior rider entries received will have entry fees paid under the Junior Rider Program. The sponsor's entry must accompany the junior's entry.

Jr. Birth Date (Mo/Day/Year)	Full Name of Parent/Guardian (Parent/Guardian <b>MUST</b> sign Liability Release on page 4)
Sponsor's Full Name	(Sponsor must be 21 years or older on Ride Day)
Sponsor's Age	<b>Sponsor Certification:</b> I have read and understand the rules/guidelines related to sponsoring a Junior Rider in this event and certify that I am qualified to act as this Juniors sponsor. Please sign & date.  (Date)

Sequence #

**Horse Information:**

Horse Registered Name	Nickname	AERC Number	Owner (If different than rider) Last, First Name		
Gender (Circle one) Gelding Mare Stallion	Breed	Horse DOB Mo/D/Yr	Color	Height	Approx. Weight
<b>Stall Reservation @ Auburn Fairgrounds</b> (See Page 3) ARRIVAL DATE :	DEPARTURE DATE:	No. of nights	Total Stall Fee** \$	<u>Initial if a stall is NOT wanted</u>	
<b>Parking at North Lot at Auburn Overlook</b> <b>\$20 per night with a two-night (Friday &amp; Saturday) minimum</b> (See Page 3)	Arrival Date: Departure Date:	# of Days @ \$20 each: \$ _____	Enter Total Fees for North Lot below **	<u>Initial if a North Lot space is NOT wanted:</u>	

Ride Entry Fee	\$ 1500.00	Additional Dinners: Friday Night Robie Park # _____ @ \$15 each Sunday Awards Banquet in Auburn # _____ @ \$15 each Thursday (Aug 7) thru Saturday (Aug 10) Stall Reservation** Additional days for stall or North Lot Camping Reservations (see Page 3)	\$
Completion Buckle AERC Non-Member Fees	\$ Inc		Inc.
Legacy Buckle (First time finishers only)	Yes/No		\$
<b>Total Amount Due with Application</b>			<b>\$</b>

**\*\*For extended Stall Reservations see above and add to entry fee.**

**Refund Policy:** Ride entry withdrawal requests received by August 2 will be granted a refund, less a \$100 non-refundable fee to cover costs. Riders who withdraw after August 2 will be granted a refund check less \$200 to cover costs of custom monogrammed Items.

**Method of Payment** (Checks are preferred)

<b>Check</b> (Make Payable to WSTF)	Check #	<b>Money Order</b> (Make MO Payable WSTF)	MO #
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card	<b>Credit Card Number</b>	Security code on Back	Expiration Date
Print Name (as it appears on the card)		Card Holder Signature	

**Office Use Only**

Rider Cancel Date	Entry Refund	Administrative Fee - \$30	Optional Refund	Stall Refund	Total Refund	Legacy Buckle Yes No	Date Refunded
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*Signature Entry*

# Western States Trail Ride August 9, 2014

Name: \_\_\_\_\_

## Included in the package:

- Tevis Buckle upon completion
- Horse Sheet (monogrammed)
- Jacket (monogrammed)
- Signature Entry* Director's Chair
- VIP/Foreign Rider Dinner
- B.B.Q Wednesday Night
- Robie Park Pre-Ride Dinner
- Easy Boots (size needed: \_\_\_\_\_)
- Preferred Seating at the Sunday Banquet
- 3 night stall reservations Thursday thru Saturday
- Assisted parking at Robie Park & Foresthill
- They Crossed the Mountain* DVD
- CalStar Insurance Membership for the weekend of the Tevis Cup

## Personalization of your Package:

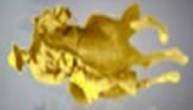
Jacket Size: \_\_\_\_\_ Cut: Women's Men's  
 Name to be Monogrammed: Yes No  
 If Yes, Spelling: \_\_\_\_\_

Horse Sheet Size: \_\_\_\_\_  
 Horse's Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_

Email \_\_\_\_\_  
 Expected date of arrival in Auburn or Robie Park \_\_\_\_\_

# The Tevis Cup



## 100-Miles-One-Day Trail Ride

### Western States Trail Foundation