



**68<sup>th</sup> Annual Wagon Train  
June 3<sup>rd</sup> through June 10<sup>th</sup>, 2017**

**Nevada to California**

<u>Hwy 50 Assn. Use Only</u>	
Ck#:	_____ Cash (_____)
Registration:	_____
Wagon Seat:	\$ _____
Shuttle:	\$ _____
Total Rec'd	\$ _____
By:	_____
Date:	_____

**PARTICIPATION FORM:** Please print and complete this form and mail it with your payment to P.O. Box 454/Placerville, CA 95667 before May 15, 2017.

**AFTER MAY 1, 2017**, please do not mail Participation Forms. You may register on site the night prior to the day(s) you want to ride. No day registrations will be accepted after 8 p.m. on Friday June 9, 2017. **AFTER MAY 1**, Call Dianna Newborn, Wagon Master, at (916) 496-0102 for more info.

**I WISH TO PARTICIPATE AS:**

\* \_\_\_\_\_ Wagon Driver/Teamster      \*\* \_\_\_\_\_ Wagon Passenger      \_\_\_\_\_ Horse Rider

(Please check appropriate box.) ONE FORM PER PARTICIPANT.

Name: \_\_\_\_\_ Phone: Cell: (\_\_\_\_\_) \_\_\_\_\_  
 Email: \_\_\_\_\_ Home: (\_\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**For Wagon Owners Only: How many seats will be available on your wagon? (\_\_\_\_\_)**

\*If you are taking passengers, you MUST provide Highway 50 Association with Proof of Insurance naming Highway 50 Association as an "Additional Insured" with a minimum \$1,000,000.liability coverage prior to the event.

\*\*Wagon Owner, one guest/spouse and one Wrangler ride for free. Immediate family members, spouse and/or children under the age of 18 and living in the same home will pay \$30.00 per person to ride in their family's wagon for the entire trip. Each person must complete a separate Participation Form.

1 .Registration Fee: Highway 5 Members: \$110. Full Trip  
 Non-Members \$130. Full Trip  
 Family Rate (up to 4 people) \$400. Full Trip  
**OR** Daily Registration: \$ 30.00 per day, per person \$ \_\_\_\_\_

**PLUS**

2. Wagon Seat \$130. Full Trip OR \$30. per day per person (\_\_\_\_days x \$30.) \$ \_\_\_\_\_  
 3. Shuttle Service \$60 Full Trip or \$10. per day per person \$ \_\_\_\_\_

**TOTAL AMOUNT PAYABLE:** \$ \_\_\_\_\_

**Total amount should include 1. Registration, 2. Wagon Seat and 3. Shuttle**

**Please indicate which days you will be riding:**

Sun\_\_\_\_ Mon\_\_\_\_ Tue\_\_\_\_ Wed\_\_\_\_ (Thu=No Travel) Fri\_\_\_\_ Sat\_\_\_\_ OR Full Trip \_\_\_\_\_

**PARTICIPANT RELEASE OF LIABILITY**

**As a participant in the 2017 Wagon Train, I agree to abide by all the directives of the Wagon Master or assigned representatives. I have read the RULES OF THE ROAD and, by affixing my signature below, agree to abide by all those Rules.**

In consideration for the Highway 50 Association permitting me to participate in the 68<sup>th</sup> Annual Wagon Train Trek, hereinafter described,

I, \_\_\_\_\_, hereby absolve the Highway 50 Association from any responsibility or liability during the 2017 Wagon Train, originating near Stateline, Nevada on June 3, 2017 and ending in Placerville, California on June 10, 2017.

**I FURTHER AGREE TO INDEMNIFY AND SAVE HARMLESS THE HIGHWAY 50 ASSOCIATION FROM ANY CLAIM FOR LOSS, DAMAGE, OR INJURY SUSTAINED BY ANY PERSON WHOMSOEVER, CAUSED BY MY NEGLIGENCE OR MISCONDUCT WHILE PARTICIPATING IN, OR PREPARING FOR THE ABOVE DESCRIBED WAGON TRAIN TREK.**

I acknowledge that circumstances may arise under which the said Association may elect to cancel the Wagon Train trek, and I hereby release and relinquish any right I may have to recover for damages, financial or otherwise, by virtue of such cancellation.

\_\_\_\_\_  
**Registrant/Guardian Signature** **Date**

Do you have any medical conditions or allergies?       YES       NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
NAME/RELATIONSHIP EMERGENCY CONTACT:

Phone # (\_\_\_\_\_) \_\_\_\_\_ Second Phone # (\_\_\_\_\_) \_\_\_\_\_

**NOTE: CURRENT COGGINS TESTS AND HEALTH CERTIFICATES ARE REQUIRED FOR ALL HORSES AND MULES. THIS IS YOUR RESPONSIBILITY.**

**Fill Out Below Only If You Are NOT Using Your Own Horse:**

I, \_\_\_\_\_, understand riding a horse can be dangerous and cause me serious injury or even death. I also understand the riding a horse I do not own is far more hazardous, therefore, I hold Highway 50 Association Wagon Train harmless for any injuries to myself or my personal property and accept full responsibility for any damage that may arise from using or renting a horse to use on Wagon Train 2017.

\_\_\_\_\_  
Signature Date

I will be using a horse owned by: \_\_\_\_\_

Contact Phone # (\_\_\_\_\_) \_\_\_\_\_

**NOTE: Current Coggins Tests and health certificates are required for all horses and mules. This is your responsibility.**

**MINOR'S CLEARANCE**

In consideration for the Highway 50 Association permitting my/our minor child to participate in the 2016 Wagon Train, hereinbefore described, I/We \_\_\_\_\_ consent to My/Our child participating in this 2017 Wagon Train Trek and for Ourselves, our heirs, administrators, and assigns, and for and on behalf absolve, waive, and release any and all claims against the Highway 50 Association or any of its representatives, their agents, for any and all injuries suffered by said minor, his/her animal, handlers of livestock belonging to her/him, or loss or damage of same while being used during this trek and celebration, which originates in Stateline, Nevada (Rendezvous time 6 p.m. on June 3, 2017) until it subsequent disbandment in Placerville, CA on June 10, 2017.

Said minor will be under the care and custody of:

NAME: \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ for the entire specified time.

I/We, parent or guardian of \_\_\_\_\_, (minor child) hereby designate the responsible adult aforementioned and/or the Wagon Master of the Highway 50 Association to authorize and obtain any emergency medical treatment from a duly licensed physician or hospital on behalf of My/Our child who is participating in the 2016 Highway 50 Association Wagon Train Trek, beginning June 5, 2016 and to and including June 11, 2016

I declare under penalty of perjury that the foregoing is true and correct.

Executed at \_\_\_\_\_ this \_\_\_\_\_ day of 2017.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT OR GUARDIAN

Any additional information re: above mentioned minor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_