



Come join us for
The Camden Hunt Spring Hunter Pace

Sunday, April 25, 2021
(Rain Date: May 2, 2021)

At
The Camden Hunt Clubhouse
Red Fox Road, Camden, SC 29020

8:00 a.m. First Ride Out
11:00 a.m. Last Ride Out

Entry Fee: \$50 per adult; \$30 under 18; \$15 non-rider lunch.
(note: rider entry fee includes boxed lunch)

Download entry form from: www.camdenhunt.com

- Two ways to enter:
 1. Complete, save and return by email to: therealcamdenhunt@gmail.com
– or –
 2. Complete, print and return by USPS mail to:

The Camden Hunt
Att: Spring Hunter Pace
P.O. Box 2285
Camden, SC 29020

- A team may consist of up to 3 riders.
- Placing is based on optimum time.
- Ribbons awarded first thru third place.
- First Flight and Hilltopper Divisions.
- Requested start times will be honored, where possible.
- Teams leave at 5-minute intervals.
- Proper footwear and helmets required.

Please remember to observe pandemic safety practices. Wear your face mask, use hand sanitizer and maintain social distancing during this event.

– Part of the Celebration Hunter Pace Series –

The Camden Hunt Spring Hunter Pace

Date: Sunday, April 25th, 2021. Start Time: 8:00 a.m.

(Rain Date: May 2nd, 2021)

Place: The Camden Hunt Clubhouse

- **Entry Fee: \$50 per adult; \$30 under 21; \$15 lunch non-rider.**
- Pre-registration and payment requested (...and appreciated).
- **Two ways to enter:** 1) Complete, print and mail your entry along with your check and proof of negative Coggins to: The Camden Hunt, PO Box 2285, Camden, SC 29020; **OR** 2) Complete, save and return your entry by way of email to: therealcamdenhunt@gmail.com. Upon arrival, show proof of negative Coggins and pay entry fees.
- Note: Every rider must complete an entry form, meaning each team member must complete and submit his/her own form, referencing the other team member(s) in the space provided.

Office Use Only

Team Number: _____

Assigned Time: _____

– Payment Information –

[] Pd Chk no. _____ [] Must Still Pay

Celebration Series? [] Yes [] No

Division: [] First Flight [] Hilltopper

Rider's Name: _____ Team Members (Up to 2 add'l) 1: _____

2: _____

Address: _____ City: _____ St: _____ Zip: _____

Email Address: _____

Rider's Age, if under 18: _____ Parent Name *(Required)*: _____ Phone: _____

Horse's Name: _____ Color: _____ M _____ G Height: _____

Coggins #: _____ Date Issued: _____

Start Time Requested: _____

Note: A TCH Coordinator will phone to confirm your start time.

WARNING/RELEASE FORM

Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from the inherent risk of equine activity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.

Liability Release *Please read carefully before signing. Serious injury may result from your participation in this activity.*

_____ (Rider's Name) would like to participate in jumping clinic, trail riding, fox hunting, hunter pacing and/or showing with The Camden Hunt. I acknowledge that I have been informed by this document and am aware of the potential for risks in riding and working with equines. However, I/my child/my ward feel that the possible benefits to individuals (myself or my child) being served are greater than the risks I have chosen to assume. I hereby am to be legally bound for myself, my heirs, assigns, executors, and/or administrators, waive and release forever all claims for injuries and/or death or damages to me, to my child/ward, to our horses and damages to our property against The Camden Hunt, Masters, instructors, owners, employees, landowners, committee members and volunteers.

Signature of Rider. If rider is under 18, Signature of Parent or Legal Guardian *Required* _____

therealcamdenhunt@gmail.com

The Camden Hunt PO Box 2285, Camden, SC 29020.

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