

RIDE YOU PLAN ON ATTENDING _____ Date _____.

Riders Name: _____.

Address: _____.

_____.

E-mail _____ Would you like to be on our mailing list _____.

Horses Name: _____.

Age _____ Breed _____.

Please note All horses are required to show proof of current rabies and Negative Coggins to participate. You may send copies with your registration form.

All Riders under the age of 18 must wear a helmet.

Are you a member of New England Trail Horse Association? _____.

Checks are maid payable to Stepping Stone Ranch.

June bug Ride

NEHT Members \$15 Non-Members \$20

Breast Cancer Ride

NEHT Members \$15 Non-Members \$20

Dog days of Summer Ride

NEHT Members \$15 Non-Members \$20

Poker Ride

\$25 All Riders

