



AHCC Ride or Stride

Awards Program Registration

Building Connection, Participation and Horsemanship

PARTICIPANT & HORSE INFORMATION

Full Name of Participant _____

Email _____

Horse's Name _____ Breed _____ Age _____

Mailing Address (ribbons to be mailed) _____

REGISTRATION DETAILS

Quarter(s) you are registering for: ☐ 2026 July - September ☐ 2026 October - December

Total Registration Fee (\$10 per horse, per quarter): _____

I have read the rules and understand the requirements: ☐ YES ☐ NO

PARTICIPANT ACKNOWLEDGMENT

Riders and handlers participate at their own risk and understand the potential risks associated with equine activities. By registering for this program, each participant in equine activities expressly assumes the risk of engaging in that activity and assumes legal responsibility for injury, loss and damage to person(s) or property resulting from the risk of equine activities. By registering, participants agree to release and hold harmless the Arabian Horse Club of Connecticut (AHCC) and its leadership from any and all liability.

Participant Signature (Parent/Guardian Signature if under 18) _____

YOUTH PARTICIPATION

Any entrant under 18 years old must have permission of a parent/guardian in order to participate. Please only participate under the supervision of a qualified adult.

SUBMIT REGISTRATION & PAYMENT

Printed form and check made out to **AHCC** and mailed to:
Denise Champagne, 471 Jones Hollow Rd, Marlborough, CT 06447
Or mail the form and use PayPal on the website at **ahcofct.org**.