Registration form for the last stage of the WC relay ride 2019

participating, knowing that minor deta my participation.	nd guidelines of this event and I am signing on to be ails are subject to change which will not allow me to cancel
•	date of birth:
Club:	Street:
ZIP Code, City:	Phone/Fax
E-Mail:	Name of horse:
Gender of horse :	Age of horse:
Based on the guidelines of this ride, my payment will be: 150 Euro particpation fee add. 50 Euro deposit total 200 Euro	
T-Shirt-size: Men ☐ S☐ M ☐ L ☐ X	L 🗆 XXL Ladies: 🗆 S 🗆 M 🗆 L 🗆 XL 🗆 XXL
Arrival: ☐ Friday ☐ S	Saturday
Publishing of photos and videos During the event photos are taken of the ride, the horses and the riders. All participants declare their agreement by signing the registration form. The pictures are used in the context of the reporting and self-promotion of the IPZV. For minors, the person entitled to education (s) agrees to this condition with his / her signature. Declaration of liability	
duration of the relay ride, we as riders and owners remai competition leaders and head judges are excluded from from clear negligence on the part of the organizers, host appropriate insurances for damages incurred by myself and head judges accountable for damages caused by myself	is event and the accommodation of my horse are at my own risk and liability. For the entire in the legal guardians of our horses (German law: 834 BGB). Organizers, hosts, group leaders, all liability as far as legally provisioned. This exclusion does not refer to all damages resulting s, group leaders, competition leaders and head judges. I hereby certify that my horses carries and others. I certifity that I will not hold organizers, hosts, group leaders, competition leaders and my horse. My horse is healthy, comes from healthy livestock and is vaccinated according tered electronically by IPZV/ISB. I accept all items listed in the guidelines, and I will be billed
If there are differences between the G This form is a service for riders from	erman version and this version: The German version is valid. abroad.
Place, Date, Signature:	
Please send this registration form to: IPZV e Tel. +49 511/876565-0, Fax. +49 511/87656	.V., z.H. Bärbel Eckert, Hildesheimer Str. 193A, 30880 Laatzen, Germany 5-65, Email: geschaeftstelle@ipzv.de