

All riders utilizing trails, driveways, and paths within Forest Preserves of Cook County (FPCC) must possess a rider's license and all horses must possess an FPCC tag. All riders must be age 12 and older. Rider license and horse tag memberships may be purchased online at <u>www.fpdcc.com/equestrian</u>. Mailed applications must include a check payable to "Forest Preserves of Cook County". All fees are non-refundable.

Fees:

To purchase <u>additional tags</u>, patrons must first purchase the "Equestrian Package" which includes 1 **Tag & 1 Rider License.** *Season runs from July 1 – June 30 annually, last (3) three months of season (April – June) 50% discount applies

	Equestrian	1 Additional	2 Additional	3 Additional	Annual
	Package	Tag	Tags	Tags	Rider
					License
Resident	\$35.00	\$22.50	\$45.00	\$67.50	\$5.00
Non-Resident	\$50.00	\$33.75	\$67.50	\$101.25	\$5.00
*Last 3 Months – Res	\$17.50	\$11.25	\$22.50	\$33.75	N/A
*Last 3 Months – Non-	\$25.00	\$17.00	\$33.75	\$51.00	N/A
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Submit (1) application per household. Mailings will go to "Rider #1" address. For each rider on this application, complete horse information (when applicable)

RIDER/HORSE #1: SELECT ONE OPTION EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) I 1 RIDER LICENSE ONLY							
Name				Date of Birth			
Street Address Apartment/Unit							
City	State	State		Zip Code			
Phone	Email Addre	Email Address					
HORSE #1: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	<u>COLOR</u>	MARKINGS		
RIDER/HORSE #2: SELECT ONE OPTION I EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) I ADDITIONAL TAG I RIDER LICENSE ONLY							
Name			Date of Birth				
Phone	Email Addres	Email Address					
HORSE #2: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	<u>COLOR</u>	MARKINGS		
RIDER/HORSE #3: SELECT ONE OPTION □ EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) □ 1 ADDITIONAL TAG □ 1 RIDER LICENSE ONLY							
Name			Date of Birth				
Phone	Email Addres	Email Address					
HORSE #3: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	<u>COLOR</u>	MARKINGS		
General Headquarters: 536 N. Harlem Avenue, River Forest, IL 60305 • P: (800)870-3666 • F: (708)771-1071							

E: <u>fpd.permits@cookcountyil.gov</u>



ANNUAL EQUESTRIAN APPLICATION

PERMITS ARE VALID JULY 1 THROUGH JUNE 30 OF THE FOLLOWING YEAR

RIDER/HORSE #4: SELECT ONE OPTION □ EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) □ 1 ADDITIONAL TAG □ 1 RIDER LICENSE ONLY								
Name				Date of Birth				
Phone	Email Addres	Email Address						
HORSE #4: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	COLOR	MARKINGS			
RIDER/HORSE #5: SELECT ONE OPTION □ EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) □ 1 ADDITIONAL TAG □ 1 RIDER LICENSE ONLY								
Name				Date of Birth				
Phone	none Email Address							
HORSE #5: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	COLOR	MARKINGS			
RIDER/HORSE #6: SELECT ONE OPTION □ EQUESTRIAN PACKAGE (1 RIDER + 1 TAG) □ 1 ADDITIONAL TAG □ 1 RIDER LICENSE ONLY								
Name		Date of Birth						
Phone	Email Addres	Email Address						
HORSE #6: Name/Stabled At:	<u>Sex</u>	AGE	<u>HEIGHT</u>	COLOR	MARKINGS			

WAIVER OF LIABILITY AND SIGNATURE

I, the undersigned, will indemnify, defend and hold harmless, the Forest Preserves of Cook County, its president, commissioners, agents, employees, and officers from and against any and all actions, in law or in equity, from liability claims for damages, demands or judgments to any person or property which arises out of my conduct or the conduct of another of my designated riders, the conduct of anyone accompanying me or the conduct of my horse(s).

I, the undersigned, have read and understand all rules, regulations and policies and will be responsible for adherence. I do hereby acknowledge and accept that I have voluntarily applied for a horse license from the Forest Preserves of Cook County. I fully understand and acknowledge that horse related activities involve risks of injury to me, and individuals accompanying me, other persons, my horse(s) and other horse(s). I waive any and all claims which I may have, on behalf of myself or my minor children, against the Forest Preserve of Cook County, its agents, employees, and officers in connection with my utilization of a private horse license.

I, the undersigned, acknowledge that participants engaging in equine activity, expressly assume the risks of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk or equine activities pursuant to 745 ILCS 47/15.

Signature:

Date: