



THE WICOMICO HUNT CLUB

## FOXCHASING 101

THE ANNUAL FOXHUNTING SCHOOL FOR HORSE AND RIDER  
SPONSORED BY THE WICOMICO HUNT  
SEPTEMBER 2021

The sport of mounted foxhunting involves disciplined riding with hounds as they chase a fox across the countryside. It is very exciting. No matter what your age, if you enjoy eventing, hunter pace events, or trail riding, consider this school. It is a comfortable and fun way to learn the basics of this fascinating sport. The school involves cross-country riding over sometimes challenging terrain at different speeds. Jumping is not required. The school also teaches the “strategy” of foxhunting, the organization and etiquette of the hunt, and the importance of safety. Both horse and rider will have a chance to be with the hounds. The school builds up to actual autumn hunting with the Wicomico Hunt. The participant is eligible to hunt with the Wicomico Hunt once during the month of October. (Locations to be announced at a later date.) English or western riders may participate.

### Dates and Times of Sessions:

Sunday riding sessions will be held at **9:00 am** at the **Starkey Farm, 13314 Starkey Farm Ln, Galena, MD 21635**, on **September 5, 12, 19, and 26 of 2021**. We will ride for 2 hours and at noon, we will get our horses untacked and have a 30- minute unmounted educational session. Each week we’ll have a different topic presented followed by a Q&A session. Please bring a food or drink item to share as we will have a small tailgate after riding and during our Educational and Q&A period. Each day we will wrap up around 1 pm.

### Eligibility and riding requirements:

Students supply their own mount. The student should be able to control his or her mount at a walk, trot, and canter. Jumping is not necessary for the school or for foxhunting, but is sometimes useful. Children 12 and under must be accompanied by a riding adult. Regardless of discipline, a helmet and boots with a heel are required. Safety vests may also be worn.

The class will be broken down into groups depending on the ability and experience of horse and rider. The riding sessions will concentrate on skills and knowledge needed to ride safely in the hunt field.

### Wicomico Hunt Website:

[www.wicomicohunt.com](http://www.wicomicohunt.com) Riding over varied terrain requires everyone to be safe. Please review this page on our website for information on group riding: [www.wicomicohunt.com/events/foxchasing-101-clinic](http://www.wicomicohunt.com/events/foxchasing-101-clinic)

### Fee:

The Clinic fee is \$250 for adults 18 and over, and \$100 for children under the age of 18. Payable by a check made out to “Wicomico Hunt Club” or by Paypal. If using Paypal, please select the “Friends and Family” option to avoid the fee and use the email address: [fox@wicomicohunt.com](mailto:fox@wicomicohunt.com)

## FOXCHASING 101 REGISTRATION FORM

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone** \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Check here is under 18:** \_\_\_\_\_

**Describe the type of riding you are currently engaged in:** \_\_\_\_\_

**Payment Method: check (included) \_\_\_\_\_ or Paypal (please include name in payment) \_\_\_\_\_**

**Mail or email this form and waiver (see below) to:**

**Mailing Address**

Wicomico Hunt Club  
% Eden Kloetzli  
12474 Barrett Farm Road  
Worton, MD 21678

**Email Address**

edenkloetzli@gmail.com

Please include the above form, a check and the signed liability waiver (see the following page).

You will receive additional information and directions. For more information, call Eden Kloetzli at 443-988-8181 or email [edenkloetzli@gmail.com](mailto:edenkloetzli@gmail.com)

WICOMICO HUNT CLUB, INC.

AGREEMENT FOR VOLUNTARY RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK COVENANT NOT TO SUE AND INDEMNITY AGREEMENT

I request permission to participate in foxhunting and/or any other equine related activities (including, but not limited to) hunter paces, hunting clinics, mock hunts, paper chases, cross-country trail rides, social activities (collectively referred to as "WHC activities") with the WICOMICO HUNT CLUB, Inc. subject to the Rules and Regulations thereof. In consideration of the grant of permission to participate in WHC ACTIVITIES, I, for myself, my child or children, my spouse, my personal representatives, heirs, next of kin, assigns, guardians and legal representatives, DO HEREBY:

- 1. DECLARE that I (the "Releasor"), do fully understand that participation in WHC ACTIVITIES involves DANGER AND THE RISK OF INJURY OR DEATH and that there is INHERENT DANGER IN THESE ACTIVITIES WHICH I APPRECIATE AND VOLUNTARILY ASSUME FOR MYSELF AND ANY MINOR CHILD I AM SIGNING FOR. I have observed or I am aware of the risks inherent in these activities, and I know as well that other participants pose a danger to me and my horse. Nevertheless, I VOLUNTARILY ELECT TO ACCEPT ALL RISKS connected with participation in WHC ACTIVITIES.
2. RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the WICOMICO HUNT CLUB, INC., Inc. and its Masters of Foxhounds, officers, directors, members, employees, huntsman, whippers-in, guests or any landowners, landholders or other persons making property available to the WICOMICO HUNT CLUB, Inc. (the "Releasees") from and against any and all claims, liabilities arising out of the actions or omissions of Releasees or any other participant in WHC ACTIVITIES which cause the undersigned to suffer injury, death or property damage, or loss, regardless of the legal basis for any such claim or liability. I hereby covenant and agree to hold Releasees harmless and indemnify them from and against any claim, legal action, judgment or expense (including reasonable attorney's fees) such Releasees may incur arising out of my participation, or that of my minor child in WHC ACTIVITIES. This release also includes disease, illness, injury and death, to which you and your family are exposed to the COVID-19 CORONAVIRUS as a result of your participation in hunt activities. Although we have adopted preventative measures, the hunt cannot guarantee that you and/or others you have contact with will not be infected.
3. This Agreement shall remain in effect during this and all subsequent participation, from year to year hereafter, until this release is revoked in writing by the undersigned participant.

This Agreement shall be governed by and construed in accordance with the laws of the State of Maryland, as to those activities occurring in the State of Maryland and in accordance with the laws of the State of Delaware, as to those activities occurring in the State of Delaware. I agree that this Agreement is intended to be as broad and inclusive as it is permitted by the laws of Maryland and Delaware and that if any portion hereof is held invalid, it is agreed that the balance shall continue in full legal force and effect.

FURTHER, I CERTIFY AS FOLLOWS: (i) I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT; (ii) I FULLY UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS, A COVENANT NOT TO SUE AND INDEMNITY AGREEMENT; AND (iii) I UNDERSTAND THAT I AND ANY MINOR I AM SIGNING FOR ASSUME ALL RISKS OF ENGAGING IN WHC ACTIVITIES AND THAT THIS RELEASE SHALL REMAIN IN EFFECT UNTIL REVOKED BY ME IN WRITING. I VOLUNTARILY AGREE TO ASSUME ALL RISKS AND ACCEPT SOLE RESPONSIBILITY OF ALL RISKS DESCRIBED HEREIN.

.X \_\_\_\_\_ Date \_\_\_\_\_
Signature (To be signed by parent or legal guardian if participant is under 18 years of age).

\_\_\_\_\_  
Please Print Name of Participant and the name of any minor participant you are signing for

\_\_\_\_\_  
Emergency contact name and phone number Email address Cell phone number

\_\_\_\_\_  
Mailing address of signer