43rd Annual Wagon Train for Youth Registration

Participant Information

Name _____

Address _____

City, State, ZIP _____

County Sheriff's Posse _____

Phone _____

Email _____

Emergency Contact _____

Emergency Phone _____

Horse Name _____

Negative Coggins Date _____

Registration Fees

Option	Early (by Sept 1)	After Sept 1
Saturday	$45	$50
Sunday	$15	$20
Weekend	$60	$70

Mail Registration & Payment

Steele County Mounted Posse
c/o Becky Schwering
7458 SE 68th St
Claremont, MN 55924

Make Checks Payable to SCMP

What's Included

- Saturday Breakfast
- Trail Box Lunch
- Brisket Supper
- Sunday Breakfast
- Camping
- Live Auction
- Donation Presentation

Event Information

Weekend Schedule

Friday Sept. 11 | 3–4 PM Arrival, Registration, Camping

Saturday Sept. 12
7:00 AM Hot Breakfast
9:00 AM Wagon Train departs (12–14 miles)
Boxed Lunch on Trail
Approx. 4:00 PM Return
Brisket, Calico Beans & Potato Salad
7:30 PM Children's Minnesota Donation Presentation
8:00 PM Live Auction

Sunday Sept. 13
7:00 AM Hot Breakfast
9:30 AM Ride (~8 miles)
11:30 AM Return
Cleanup & Departure by 3:00 PM

Remember: Bring current Negative Coggins, camping gear, horse feed, water buckets, and weather-appropriate

Minnesota Sheriff's Mounted Posse Association

43rd Annual Wagon Train for Youth

Release of Liability and Assumption of Risk Agreement
September 11–13, 2026

Participant Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

ASSUMPTION OF RISK

I acknowledge that I have voluntarily applied to participate in the Minnesota Sheriff's Mounted Posse Association (MSMPA) 43rd Annual Wagon Train for Youth. I understand horseback riding, wagon travel, camping, working around horses, public roads, trails, weather, and related activities involve inherent risks that may result in serious injury, death, or property damage. I voluntarily assume all known and unknown risks associated with participation.

Participant Initials: _____ Parent/Guardian Initials (if under 18): _____

RELEASE OF LIABILITY

In consideration of being permitted to participate, I release and hold harmless the Minnesota Sheriff's Mounted Posse Association, Steele County Mounted Sheriff's Posse, participating Sheriff's Offices, volunteers, officers, sponsors, property owners, agents, and representatives from any claims arising from my participation, to the fullest extent permitted by Minnesota law. I authorize emergency medical treatment if necessary and accept responsibility for any associated costs. I also grant permission for photographs and video of the event to be used for MSMPA promotional purposes.

ACKNOWLEDGMENT

I have carefully read and understand this Release of Liability and Assumption of Risk Agreement. I understand that this is a legally binding contract and sign it voluntarily.

Participant Signature: _____

Date: _____

Parent/Guardian Signature (i _____

Date: _____