



Fort Seward, Inc Wagon Train Registration Form

DIAMOND WILLOW TRAIL JUNE 22ND-28TH, 2025

Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Male: <input type="checkbox"/> Female: <input type="checkbox"/> Age:	Male: <input type="checkbox"/> Female: <input type="checkbox"/> Age:
Emergency Contact:	Emergency Contact:
Phone:	Phone:
Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Male: <input type="checkbox"/> Female: <input type="checkbox"/> Age:	Male: <input type="checkbox"/> Female: <input type="checkbox"/> Age:
Emergency Contact:	Emergency Contact:
Phone:	Phone:
Fees: 3yr. & Under: \$195/: # of attending: _____ 4yr. to 12yr. old: \$ 325/: # of attending: _____ 13yr to 18yr old: \$ 395/: # of attending: _____ 19yr & Older: \$495/: # of attending: _____ # Of Saddle horses: _____	Payment: Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Check <input type="checkbox"/> Card #: _____ Exp _____ CVV _____ Check # _____ Paying in Full <input type="checkbox"/> Paying 30% down <input type="checkbox"/> Group Discount applies (registering 3 or more at once) 10% off <input type="checkbox"/> Total Due: _____ Payment of: _____ Remaining due: _____

Please read this release, all registering participants must sign the line with the "X" below in agreement of this release. NOTE: This release may affect your legal rights. I (each of), the undersigned, hereby request permission to register and be a participant of the Fort Seward, Inc. Wagon Train. I know the risks and dangers involved in the activity, and that unanticipated and unexpected dangers may arise during such activity, and I assume all risks of injury to my person and property that may be sustained about the stated activity and associated activities of the Fort Seward, Inc. Wagon Train. I agree to comply fully with the regulations and policies of the Fort Seward Wagon Train as described herein and, in the policies, sent out or announced before or during the ride pertaining to community, alcoholic beverages, period clothing and all other items expressed in this brochure. I understand that upon personal violation of any regulations or policies, I will be asked to leave without a refund of registration fees, by the board of directors. I also understand that any route or activity chosen as a part of our outdoor adventure may not be the safest but has been chosen for its interest and challenge. Animals will be used or are present as part of our activities and I and my family understand that an animal is irrespective of its training and usual past behavior and characteristics, may act or react unpredictably at times based upon instinct or fear which, likewise, is an inherent risk to be assumed by each participant in the activity. In consideration of the permission granted to me to participate in the stated activities, I hereby, for myself, my heirs, administrators and assigns, release, remise, and discharge Fort Seward, Inc., and any other entity that maybe considered the operator and sponsor of the activities, and their respective servants, agents, officers, and officials, and all other participants in the stated activities of and from all



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claims, demands, actions, and causes of action of any sort, for injuries sustained by my person and/or property during my presence on the Fort Seward, Inc. Wagon Train, and my participation in the stated activities due to negligence or any other fault. I also agree that the legal laws of the State of North Dakota will preside in all matters requiring legal assistance. I represent and certify that I am over the age of 18 years, and if I am under the age of 18 years, I represent and certify that I have the permission of my parents and/or guardians to participate in the stated activities, and that they have full knowledge thereof. For all registrants under the age of 18 years, the undersigned parents and/or guardians sign as such parents and/or guardians and join in this instrument.

I HAVE READ AND UNDERSTAND THE FOREGOING REQUEST AND RELEASE AND HAVE EXECUTED THIS REQUEST AND RELEASE BY MY SIGNATURE BELOW. (ALL REGISTRANTS MUST SIGN INCLUDING CHILDREN)

1.	Date:	3.	Date:
2.	Date:	4.	Date:

PLEASE NOTE: MINORS UNACCOMPANIED BY PARENT OR LAWFUL GUARDIAN MUST HAVE THE FORM COMPLETED ON REGISTRATION:

- 1.Registration will be limited to 120 wagon passengers. Registration will close when the 120th wagon passengers' registration is received.
- 2.Acceptance will be on a first come first serve basis.
- 3.To register for wagon train, send completed Registration blank with full payment of fees to the registrar.
- 4.Any registration over 120 will be placed on a waiting list in chronological order. Those placed on the waiting list will be notified by the registrar.
5. In-camp Registration will take place on Sunday, June 22nd from 2:30-5pm., at the Fort Seward Military Base Park along 281 Jamestown, ND. Supper will be served between 5pm & 6pm.
- 6.Orientation will take place on Sunday, June 22nd at 6:30- 7:00 pm., at Fort Seward Park. Activities will be designed to get acquainted, make staff introductions, discuss tailride guidelines and answer your questions. **Please attend!**
- 7.On Monday, June 23rd, we will rise, eat, pack, and move out on the trail.
- 8.Fort Seaward is located out of town; Take Highway 281 through Jamestown on the northwest corner. The park is on the crest of the hill overlooking the city. 1100 5th Street NW (look for signs).

Minors Unaccompanied by Parents or Lawful Guardian

We the parent(s) or lawful guardian of the minor(s) _____, fully expect and approve _____ to take adult responsibility, insuring that the needs of the above named minor(s) are met and will insure that the minor(s) will assume responsibilities previously described on this registration form, brochure, and policies during the Fort Seward, Inc. Wagon Train.

X _____ Date: _____ X _____ Date: _____

During the wagon train, I (we) can be reached at: () - or () -

Wagon Train Guardian: I _____, being of at least 21yrs. Of age will accept adult responsibility of the above-named minor(s) while we are on the Fort Seward Wagon Train.

X _____ Date: X _____ Date:

For more Information: **Email:** registrar@covered-wagon-train.com **Website:** http://covered-wagon-train.com **Social Media Sites:** Facebook, Instagram **Address:** P.O. Box 244 Jamestown, ND 58402. Visit our website; It has a question-and-answer page, handy packing list, recipes, previous wagon train quilt photos, wagon train photos, news, register on-line, etc. **Refunds:** All refund requests must be received in writing. Prior to June 1st, a 12% processing fee will be withheld from refund. **Cancellations** after June 1st will be at the discretion of the Ft. Seward, Inc. Board, pending non-returnable purchases made on your behalf, including the minimum 12% processing fee to be withheld.