

EQUESTRIAN PERMIT APPLICATION 2019 - 20



MOREAU LAKE STATE PARK
605 Old Saratoga Road, Gansevoort, NY 12831
Phone # (518) 793-0511 Fax # (518) 798-5385



Parks, Recreation
and Historic Preservation

*** MANDATORY REQUIREMENT - PROOF OF NEGATIVE COGGINS TEST AND RABIES VACCINATION ***
Test must be dated on or after January 1, 2018

RIDER'S NAME: _____ PHONE #: _____

EMAIL ADDRESS: _____

ADDRESS: _____
(Street) (City) (State) (Zip code)

Yes! I would like to be on the general mailing list to receive announcements about other MLSP events and programs.

TYPE OF PERMIT REQUESTED: ANNUAL: \$20 -OR- DAILY: \$10

IS THIS PERMIT A RENEWAL FROM LAST YEAR? YES NO

If Yes, Permit Number for 2018-19: _____

~Annual permits are valid: **4/1/2019 THROUGH 3/31/2020** ~Daily permits must be used on the **SAME** day they are purchased

~Checks and Money Orders should be made payable to **NYS PARKS**

IN CASE OF EMERGENCY, PLEASE NOTIFY: (OTHER THAN STABLE)

NAME: _____ RELATION: _____ PHONE #: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

STABLE INFORMATION: (FOR EMERGENCY PURPOSES ONLY)

STABLE NAME: _____ PHONE #: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

Riders age 18 & under are REQUIRED BY LAW to wear an ASTM approved riding helmet.
The Park strongly encourages ALL riders to wear an ASTM approved riding helmet.

I HAVE READ THE MOREAU LAKE STATE PARK EQUESTRIAN RULES & REGULATIONS AND I AGREE TO ABIDE BY THEM.
I UNDERSTAND THAT IF THIS PERMIT IS REVOKED FOR VIOLATING THESE RULES, I WILL FORFEIT RIDING PRIVILEGES IN THE PARK.

SIGNED: _____ DATE: _____

*** OFFICE USE ONLY ***

ANNUAL PERMIT #: _____ REPLACEMENT HORSE #1 NAME: _____

MISC. RECEIPT #: _____ COGGINS DATE (MUST BE ON OR AFTER 1/1/2018): _____

CASH CREDIT CHECK #: _____ HORSE #2 NAME: _____

DATE: _____ COGGINS DATE (MUST BE ON OR AFTER 1/1/2018): _____

Rabies Vaccination - Horse #1 _____ Horse #2 _____

ISSUED BY: _____

Revised 2/19