

Meadow Ridge Equestrian

51303 Range Road 262, Spruce Grove, Alberta Tel: 780-886-0304 or 780-953-2251 info.meadowridge@gmail.com www.meadow-ridge.ca

Day Camp Registration Form

Date(s)	of Camp:	Child Birth Date:
Name o	f Child:	
Name o	f Parent/Guardian(s)	
Address		
City:		Postal Code:
Phone (Home):	Phone (Mobile):
Email:		
Emerge	ncy Contact:	Phone:
About yo	our child:	
	done in the last 6 mo	een riding? Describe where & what types of riding they have ths. es/important information
3.	How did you hear ab	ut our programs?
Photo Rel	ease:	
I,during les	ssons for specific uses i	, give Meadow Ridge Equestrian permission to take pictures publications, bulletins, or general display.
Signature	:	Date:
		FULL ONE WEEK PRIOR TO START DATE by e-transfer to by cheque made out to Meadow Ridge Equestrian, or by cash.
Initial:		

Cancellation policy:

• Meadow Ridge Equestrian cannot provide refunds or guarantee makeup dates if client misses a camp due to illness, injury, appointments, other commitments, etc.

Important Information:

- Riders are strongly encouraged to purchase their own ASTM/SEI approved helmets. These can be purchased at Greenhawk, G&E Pharmacy, or online from Amazon
- What to bring:
 - All children are required to wear long pants as well as a boot with a ½ inch heel while riding (rainboots / cowboy boots are acceptable)
 - Please send your child with a change of clothing shorts and running shoes for when they are not riding.
 - Hats and rain jackets are recommended!
 - Sunscreen and bug spray
 - o Lunch, snacks (2 breaks), and PLENTY of fluids
 - o Epi-pens or any other allergy medications
- All campers are asked to arrive on time
- Registration is on a first come, first serve basis
- Instructors will do their best to assign students to horses that match their abilities and personalities. Riders are not guaranteed to ride the same horse every day
- If you have any concerns about your child's camps please speak to the instructor first. If the problem still has not been resolved to your satisfaction, please reach out to management Brandy at 780-886-0304

Waiver Form for Meadow Ridge Equestrian RELEASE, WAIVER OF CLAIM, AND ASSUMPTION OF RISK WARNING PLEASE READ CAREFULLY

The undersigned acknowledges that activities undertaken at the facility and lands of Meadow Ridge Equestrian have inherent risks. Meadow Ridge Equestrian will endeavor to provide reasonable services and to act reasonably, although Meadow Ridge Equestrian is not able to assure you that the services they, or anyone else at Meadow Ridge Equestrian facility or associated lands provides or the horses and animals at Meadow Ridge Equestrian will meet your needs or provide a trouble free or risk free experience.

The undersigned releases Meadow Ridge Equestrian, its directors, agents and employees from all liability and waives, as against Meadow Ridge Equestrian its directors, agents and employees all recourse, causes of action or claims of any kind for loss or damages, including any consequential loss or damage, arising from the presence or activities of the undersigned, or anyone for whom the undersigned is a guardian or caregiver at Meadow Ridge Equestrian or any associated lands, and voluntarily accepts the legal risk associated with the presence or activities of the undersigned or anyone for whom the undersigned or a guardian or caregiver at Meadow Ridge Equestrian facility or associated lands, thereby expressly giving up any right of action from the physical risk arising from any actions initiated by the undersigned or, by anyone who is not affiliated with Meadow Ridge Equestrian who is acting on the undersigned's behalf.

The undersigned further acknowledges and agrees that:

- Equestrian activities can be very dangerous and expose all participants or observers to many risks and hazards, some of which are inherent in the very nature of the sport.
- As a result of the aforementioned risks and hazards, I may suffer personal injury, property loss or even death as a result of my presence and actions of the facility of Meadow Ridge Equestrian and any activities I engage in with Meadow Ridge Equestrian, or in or around Meadow Ridge Equestrian facility.
- Some of the risks and hazards are foreseeable, but many others are not.

I nevertheless, freely and voluntarily assume all possible risks, and hazards and acknowledge that my use of or attendance at the facilities at Meadow Ridge Equestrian or its associated lands, while participating in or observing any activities, shall be entirely at my own risk, or at the risk of those for whom I am a guardian or caregiver. I understand that Meadow Ridge Equestrian, its directors, agents and employees do not assume any responsibility or liability whatsoever for my actions while I am observing or engaged in any of the activities or using any of the facilities in any way.

By signing the Release, Waiver of Claim and Assumption of Risk Warning, I will be FOREVER PRECLUDED FROM SUING OR OTHERWISE CLAIMING AGAINST MEADOW RIDGE EQUESTRIAN, its directors, agents and employees for any loss of damage or injury or death I may sustain as a result of my own actions.

I agree to indemnify and hold harmless Meadow Ridge Equestrian, its directors, agents and employees from any and all 3rd party claims initiated as a result of any act or omission of the undersigned or anyone for whom the undersigned is a guardian at the Meadow Ridge Equestrian facility, or associated lands, for events alleged to have occurred at Meadow Ridge Equestrian facilities or associated lands.

I understand that Meadow Ridge Equestrian intends all users or observers of activities at Meadow Ridge Equestrian facility, or any associated lands, sign this Release, Waiver of Claim and Assumption of Risk Warning. I have carefully read and accept the terms of this Release, Waiver of Claim and Assumption of Risk Warning. I acknowledge that no representation of fact or opinion, threat or inducement has been made or given by Meadow Ridge Equestrian, its directors, agents or employees to induce the signing of this Release.

This Release, Waiver of Claim and Assumption of Risk are binding upon myself, my heirs, my executors, administrators, personal representatives, and assigns.

DATED:			
(mm/dd/yyyy)	(Signature of Parent or Legal Guardian)		
(Witness)	(Printed name of Student/Rider)		
(Printed Name of Witness)			



Meadow Ridge Equestrian the "**Organization**"

Facility Use Waiver

WAIVER OF LIABILITY FOR ALL CLAIMS AND RELEASE OF LIABILITY PLEASE READ CAREFULLY BEFORE SIGNING.

Completed waivers must be returned prior to entry and use of the Organization's facilities. This waiver does not affect accident and out-of-country travel insurance provided by the Organization where applicable.

By signing below, the Participant (named below) and/or the Participant's Guardian understands and acknowledges, the risks, dangers, and hazards which are inherent on entering all lands, properties, facilities, structures, installations, vehicles or equipment owned, leased, operated or otherwise controlled by the Organization (the "Premises"), which risks include, but are not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; close proximity to or contact with surfaces, equipment, fixtures, or other objects that, despite the Organization's efforts, may be infected with COVID-19 or other communicable illnesses; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; tripping hazards; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; the negligent use of the Premises by others; inadequate safety measures or unsafe Premises; other circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officers, therapists, or volunteers (together, the "Releasees"); or negligence or omission of the Releasees (collectively, the "Risks").

In consideration for allowing the Participant to use the Premises, the Participant and/or the Participant's Guardian: (a) release, discharge and forever hold harmless the Releasees from any and all liability for damages or loss arising as a result of the Risks arising from entry into or use of the Premises; (b) waive any right to sue the Releasees in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, damages or losses of any kind that may arise as a result of the Risks or in connection with entry into or use of the Premises, including without limitation the right to make a third party claim or claim over against the Releasees arising from the same; and (c) freely assumes all risks associated with the Risks or anything incidental to the Risks, which may arise as a result of or in connection with use of the Premises. YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION AND RELEASEES.

I confirm that I have read and fully understand this waiver and release of liability. I sign this waiver and release of liability voluntarily without any inducement, assurance, or warranty being made to me.

Print Name:		Date of Birth:	
	the "Participant"	_	(mm/dd/yyyy)
Print Name:		_	
	the "Guardian" (if Participant is a minor)		
Signature:		Date:	
_	Participant or Guardian for minor	_	(mm/dd/yyyy)

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants <u>Under the Age of Majority</u> in the Province or Territory in which the Equine Activities are Provided by the Host <u>WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS.</u> READ IT CAREFULLY!

The Pare	ent/Guardian Must Read and Understand this W	aiver Prior to Infant	Participating in E	quine Activities			
The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me on behalf of the Infant Participant named below with and for the benefit of:							
Activities" coaching	, agents, and site property owners or lessees (the "Includes but is not limited to competitions, tournamer and training provided by the "Host" to the Infant Participation (in the infant Participation in the infant Participatio	Host"). Without limiting onts organized and /or cant.		foregoing, "Equine			
	I am the Parent/Guardian of the Infant Participant and	_	er on hehalf of the Inf	ant Particinant in my			
''.	capacity as Parent/Guardian and with the intent that the legal purposes.						
2.	I am aware that there are inherent dangers, hazards and risks ("Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to: (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects; (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects; and (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine. (d) the potential of natural or man-made hazards being present that can cause me harm, including communicable						
3.	disease I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, sickness, disease, medical payments, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities".						
4.	I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".						
5.	In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree: (a) to waive all claims that the Infant Participant has or may have in the future against the "Host"; (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Infant's participation in "Equine Activities".						
6.	I agree that this waiver and all terms contained herein Province or Territory of Canada in which the "Equine to to the exclusive jurisdiction of the courts of that Prov- exercise jurisdiction over the terms and claims referred the Province or Territory of Canada in which the "Equin	Activities" are provided ince or Territory of Cad to herein. Any litigatio	by the "Host". I hereb nada and I agree that n to enforce this waive	y irrevocably submit to other court can			
7.	I confirm that I have had sufficient time to read an agreement represents the entire agreement between and it is binding on myself, the Infant Participant and o	the "Host", myself as P	arent/Guardian, and th				
Infant Participant's Name			Date of Birth_				
	ıardian's Name						
Address_		City	Province	Postal			
Signed this day of, 20(Signature of Parent/Guardian of Infant Participant)							
(Print Name of "Host" Witness to Signing and Initialing) (Signature of "Host" Witness)							