

Meadow Ridge Equestrian info.MeadowRidge@gmail.com 51303 Range Road 262, Spruce Grove, Ab

Meadow Ridge Volunteer Registration

NAME:					
ADDRESS:	· · · · · · · · · · · · · · · · · · ·				
CITY:		POSTAL CODE:			
PHONE: (W)		(H)		(C)	
EMAIL:					
Have you ever worke	ed with individu	als with spec	cial needs?	Yes / No	
Do you have any exμ	perience with ho	orses? (Breif	Descriptio	n) Yes / No	
When are you available	to Help?				
Mornings	· _	Afternoons		Evenings	
Weekday	rs	Weekends			
How did you hear ab	out Meadow Ri	idge Equestri	an?		
LIABILITY RELEAS	iE				
As a volunteer with Mea horseback-riding progra and to myself are greate self, my heirs and assig damages against Meade	ndow Ridge Eques m. However, I fee er than the risk ass ns, executors or a ow Ridge Equestri oyees and the pro	I that the possil sumed. I hearby dministartors, vi ian, its Board o operty of 51303	ble benifits to y, intending to vaive and re f Directors, I Range Road	d 262, Spruce Grove, Ab for	
DATE:		SIGNATURI	E:	· · · · · · · · · · · · · · · · · · ·	

PHOTO RELEASE

and all photographs, and any other audiovisual materials taken of me for promotional material, educational activities, exhibitions, or for any other benefit of the program. PRINTED NAME: DATE: SIGNATURE: STANDARDS OF CONFIDENTIALITY , recognize that my role as a volunteer with Meadow Ridge will entitle me to certain information about the riders which should be treated as confidential. All information given to me by a parent/instructor/rider in the relation to a rider will be discussed only with the personnel of Meadow Ridge. At no time will I discuss any information about the riders with the other parents or any other individuals. I recognize that all material and papers pertaining to the rider's care are legal documents and that all information contained therein is confidential. PRINTED NAME: SIGNATURE: **EMERGENCY CONTACT:** NAME:______RELATION:_____ PHONE: (C) (H) In case of emergency, I give permission to Meadow Ridge to secure medical treatment including X-ray, hospitalization, and medication. PRINTED NAME:______ DATE:_____

SIGNATURE:

I consent to authorize the use and reproduction by Meadow Ridge Equestrian of any

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 3^{rd} 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)			

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 Parent/Guardian Must Read and Understand this W The following waiver of all claims, release from all liability, assur agreement are entered into by me on behalf of the Infant Participa	nption of all risks, agreeme	ent not to sue and	-				
Meadow Ridge Equestrian , its directors, officers, employees, volunteers, business operators, agents, and site property owners or lessees (the "Host"). Without limiting the generality of the foregoing, "Equine							
Activities" includes but is not limited to trail rides, pack trips or riding instruction provided by the "Host" to the Infant Participant.							
Initial Each Item below after Reading and Understanding							
1. I am the Parent/Guardian of the Infant Participant and a capacity as Parent/Guardian and with the intent that his purposes.							
 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. 							
	3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, 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 particip	ation in "Equine	Activities", I and my				
heirs, next of kin, executors, administrators and assigns executors, administrators and assigns (collectively our "L			er heirs, next of kin,				
(a) to waive all claims that the Infant Participant has or r	nay have in the future agair	nst the "Host";					
 (b) to release and forever discharge the "Host" from all the Infant Participant, or our "Legal Representatives" 							
"Equine Activities" due to any cause, including but n	ot limited to negligence (fai	lure to use such c	are as a reasonably				
prudent and careful person would use under similal contract or mistake or error in judgment of the "Host"		f any duty impose	d by law, breach of				
(c) to be liable for and to hold harmless and indemnify		proceedings, clai	ms, damages, costs				
demands, including court costs and costs on a solic kind arising out of or in any way connected with the I			hatsoever nature or				
6. I agree that this waiver and all terms contained herein			s by the laws of the				
Province or Territory of Canada in which the "Equine Act	ivities" are provided by the	"Host". I hereby i	rrevocably submit to				
the exclusive jurisdiction of the courts of that Province or jurisdiction over the terms and claims referred to here							
Province or Territory of Canada in which the "Equine Acti	vities" are provided by the "	'Host".	be monated in the				
7. I confirm that I have had sufficient time to read and unde							
represents the entire agreement between the "Host", r binding on myself, the Infant Participant and our "Legal R		, and the Infant F	'articipant, and it is				
Please Print Clearly	•						
Infant Participant's Name		Date of Birt	n				
Address_	City	Province	_Postal				
Parent/Guardian's Name		Date of Bir	th				
Address_	City	Province	_Postal				
Phone # (Email:							
	Signed this day o	of	, 20				
(Signature of Parent/Guardian of Infant Participant)							
(Print Name of "Host" Witness to Signing and Initialing)	(Signature o	of "Host" Witness)					

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants Over the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

Every Person Must Read and Understand this Waiver Before	re Participatino	g in Equine Activities					
The following waiver of all claims, release from all liability, assumpt agreement are entered into by me (the Participant) with and for the be	enefit of:						
Meadow Ridge Equestrian, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting he generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips and riding instructions provided by the "Host" to the Participant.							
Initial Each Item below after Reading and Understanding e	ach item:						
 I am aware that there are inherent dangers, hazards and risks (collectively "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; (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. 							
2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of personal injury, death, property damage or loss resulting from my participation in "Equine Activities".							
3. 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 even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to me in my participation in "Equine Activities".							
 4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns (collectively my "Legal Representatives") agree: (a) to waive all claims that I have or may have in the future against the "Host"; (b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss resulting from my participation in the equine activity 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 my participation in "Equine Activities". 							
5. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".							
6. I confirm that I have had sufficient time to read and understated represents the entire agreement between myself and Representatives".							
7. I confirm that I have reached the age of majority in the proving	nce in which I am բ	participating in "Equine A	ctivities".				
Please Print Clearly							
Participant Name		Date of Birth					
Address_	City	Province	Postal				
Phone # () Email:							
(Signature of Participant)	Signed this	day of	, 20				
(Print Name of "Host" Witness to Signing and Initialing)							
(Signature of "Host" Witness)	Signed this	_ day of	, 20				