

1st Annual Quesnel Horse Show Sept. 9, 10, 11

WAIVER FOR RIDER UNDER 19 YEARS OF AGE

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

For Participants Under 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!

The Parent/Guardian Must Read and Understand this Waiver Prior to Infant Participating in Equine 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 Quesnel Fall Fair, 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 are 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 each term:

_____ I am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the Infant Participant in my capacity as Parent/Guardian and with the intent that his waiver be binding on myself and the Infant/Participant for all 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.

_____ 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".

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_____ 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 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".

_____ 7. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between the "Host", myself as Parent/Guardian, and the Infant Participant, and it is binding on myself, the Infant Participant and our "Legal Representatives".

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Please Print Clearly

Infants Participant's Name: _____

Date of Birth: _____

Address: _____

City _____ Province _____ Postal Code _____

Parent/Guardian's Name: _____

Date of Birth: _____

Address: _____

City _____ Province _____ Postal Code _____

Signature of Parent/Guardian of Infant Participant

Signed this _____ day of _____, 20_____

WAIVER FOR RIDER UNDER 19

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REGISTRATION FOR RIDER UNDER 19 YEARS OF AGE

Rider Name: _____

Phone # _____

Mailing Address _____

City _____ Province _____ Postal Code _____

E-mail: _____

Age Group _____

Birthdate (Jrs) ____/____/____

HCBC: Handler#: _____

Owner#: _____

Owner Name: _____

Horses Name _____

Reg# _____ Breed _____ Age _____ Height _____

Class Numbers: ____/____/____/____/____/____/____/____/____/____

____/____/____/____/____/____/____/____/____/____

____/____/____/____/____/____/____/____/____/____

____/____/____/____/____/____/____/____/____/____

____/____/____/____/____/____/____/____/____/____

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| Classes | Cost per Entry | Number of Entries | Sub-Total |
|--|----------------|-------------------|-----------|
| Seniors | \$7.00 | | |
| Intermediate Juniors | \$5.00 | | |
| Lead Line (No Office Fees for entrants in ONLY lead line) | \$1.00 | | |
| Stake Classes | \$12.00 | | |
| Office Charge (Lead line only excused from office fees) | \$10.00 | | |
| Post Entry Fees per class (after the closing date) | \$5.00 | | |
| Total Cost | _____ | _____ | |

Entry Deadline: Aug 29th at 9:00 pm

ALL FEES MUST BE PAID BEFORE ENTRY WILL BE ACCEPTED

For more information, please email Carolyn at summitperhorse@gmail.com or call 250-998-4334

All entry and waiver forms must be printed, signed & emailed to summitperhorse@gmail.com

All payments must be made via E-transfer to quesnellfallfair@gmail.com

Password: **Qffhorseshow**

**Fees must be paid before entry closing date, or late fees will apply.*

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ENTRY CHECKLIST

Please initial each box and include this checklist with your entry form.

Thank You

_____ I have read and agreed to all rules pertaining to this show. I agree to be bound by these rules and agree to conduct myself by these rules.

_____ I have entered the correct age category-(the age you will be on January 1, 2022) & included the date of birth for the Junior rider.

_____ I have signed and dated the correct waiver and included all copies of current HCBC membership cards for both the Owner and the Rider.

_____ Both the rider and parent/guardian have signed the entry form for riders under 19 years of age.

_____ All riders, regardless of age, have signed the forms.

_____ I agree that I am responsible for entering the correct classes and that I am responsible for any errors or omissions on the entry form.

_____ I have included all applicable show fees.

_____ If I want to collect points for another association, I will hand in a completed form with all classes that I have entered on the form to the Entry Secretary prior to the show. If forms are not completed correctly, no points will be recorded.

_____ I am aware that camping sites and horse stalls are available on a first registered first-served basis.

_____ I understand that the Camping and Stall Form is available on the Quesnel Fall Fair website and must be submitted and paid for before August 29th, 2022

Signature of Rider

Signature of Parent/Guardian of Infant Participant (if applicable)

Signed this _____ day of _____, 20_____