



Beaumont Town and Country Daze
AGRICULTURAL SOCIETY 4-H & OPEN HORSE SHOW
Sunday, June 12, 2011

REGISTRATION FORM

Show Starts: 9:00 A.M. SHARP

This is a “**one horse – same rider**” competition. Additional horses per rider require additional entry fees. Classes cancelled if less than 3 riders. See flyer (class list) for other restrictions.

BADAS 4-H & Open Horse Show operates under **CEF rules**.

Name of rider: _____
 Name of horse (1) _____
 Name of horse (2) _____
 Name of horse (3) _____

Place the number of the horse (1, 2 or 3) beside the class number (at right) for each class in which that horse is entered.

FEE:	\$50.00	Pre-registration per horse (all classes entered)	\$ _____
	\$75.00	Per horse after June 5/11 (all classes entered)	\$ _____
	\$25.00	Per additional horse x _____ Horses	\$ _____
	\$30.00	Gymkhana only	\$ _____
OR	\$10.00	Per class per horse (Class 11 – \$5)	\$ _____
AND	\$2.00	Deposit per entry number x _____ Horses	\$ _____
		Stabling (1 horse per stall) covered - \$20.00; outdoor - \$10.00	\$ _____
		TOTAL	\$ _____

Classes 2010:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____ (\$5)
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____
21. _____
22. _____
23. _____
24. _____
25. _____
26. _____
27. _____
28. _____
29. _____
30. _____
31. _____

If a rider is **under the age of 18 years as of June 12, 2011**, he/she will **NOT** be permitted to show **without the signature of:**

Parent or Guardian: _____
 Participant’s Name: _____
 Age: _____ Birthdate: _____

General Use Waiver (over) MUST be signed by all participants. “Proper equipment” as specified in the *General Use Waiver* includes helmets and boots with heels.

The undersigned hereby agrees to be bound by the decision of the Show Committee and Judge; to comply *with any special regulations; and to hold harmless the Beaumont and District Agricultural Society* and persons in any way connected with this Show from any loss, damage, injury, accident, illness or disease *from any participant/horse in the Event*.

Name of Owner: _____
 Signature of Owner _____
 Address: _____
 Postal Code _____ Phone No.: _____

For more information – visit www.beaumontagsociety.com / Email beaumontagsociety@live.ca

Or call: Loretta Martin (780) 464-0447 or Bruce Walker (780) 929-2891

Beaumont & District Agricultural Society supports and promotes 4-H and Pony clubs in Alberta’s Capital Region



Beaumont and District Agricultural Society

General Use Waiver

Release of Liability, Waiver of Claims and Indemnity Agreement: (Please read carefully)

WARNING: By signing this document, you waive certain legal rights, including the right to sue. Please read carefully.

Competitors, spectators, exhibitors, owners, volunteers, agents and all other participants in activities at the *Beaumont & District Agricultural Society Fairgrounds* must carefully read this document before signing. Participants will NOT be allowed to use Fairgrounds facilities without a signed waiver form (by Parent/Guardian if competitor is under 18 years of age).

There are many inherent risks resulting from dangers and conditions that are an integral part of participating in various activities at the Fairgrounds. These risks include but are not limited to:

1. the unpredictable behavior of horses, livestock, and dogs, however caused;
2. the unpredictable reaction of animals to their environment, including sounds, sudden movement, objects, persons or other animals;
3. natural hazards such as uneven footing, rocks, holes, or trees;
4. man made hazards such as storm water ponds;
5. collision with objects, persons or other animals;
6. the failure of equipment, however caused; and
7. the action or inaction of other participants.

I understand and acknowledge that these risks may result in **INJURY, HARM OR DEATH** to the Participant or to other persons or may result in damage to property, including injury or death to the Participant's animal(s), and that these risks exist regardless of the skill level of the Participant. I also understand that the failure to wear or use proper equipment increases the possibility that these risks may result in injury or death to the Participant. Proper equipment, are **mandatory for competitors under the age of eighteen (18) and strongly recommended for those eighteen (18) and older.**

In consideration for participating in activities at the Beaumont & District Agricultural Society Fairgrounds, I agree as follows on behalf of myself, or as parent or guardian of minor Participants:

1. to hereby waive any and all claims that I have or may have in the future against *Beaumont & District Agricultural Society*, any organizing committee(s), the Town of Beaumont, Leduc County, or the employees, agents, volunteers, or contractors of the above named organizations (collectively, the "Parties");
2. to hereby release all of the Parties from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer, as a result of participation in activities at the *Beaumont & District Agricultural Fairgrounds* by any Participant, including minor Participants, due to any cause whatsoever, including negligence, breach of contract, breach of any statutory or other duty of care, including any duty of care owed under the Occupier's Liability Act, R.S.A. 1980 c.O-3 as amended from time to time, on the part of any of the Parties;
3. to hereby hold harmless and indemnify all of the Parties from any and all liability for any damage to the property of, or personal injury to, any third party resulting from participation in equine activities by any Participant, including minor Participants; and
4. that this Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives in the event of my death or incapacity.

In entering into this Agreement I am not relying on any oral or written representations or statements made by any of the Parties other than what is set forth in this Agreement.

I have read and I understand this Agreement. I am aware that by signing this Agreement I am waiving certain legal rights that I, my children, or our respective heirs, next of kin, executors, administrators, representatives, and assigns may have against anyone or all of the Parties.

This waiver is in effect until the 31st day of December, 2011.

SIGNED in the County of Leduc in the Province of Alberta,
this _____ day of _____, 20____.

Signature of Participant, or Parent or Guardian

Parent or Guardian if participant is less than 18 years of age

Name of Participant (Please Print Clearly)

Name of Parent or Guardian (Please Print Clearly)

If participant is less than 18 years of age

Name(s) of other participant(s) less than 18 years of age under the care and responsibility of the above guardian

Updated Feb. 25, 2011

AEF# or equivalent insurance policy number

Signature of Witness

Name of Witness (Please Print Clearly)

Participant's Phone Number

