

THORSBY GYMKHANA CLUB
2013-2014 Winter Series Membership Application

Membership applications **must be completed prior to competing at Thorsby Gymkhana Winter Series.**
 Membership applications **must be completed and fees PAID prior to be eligible to compete for points at Thorsby Gymkhana Winter Series.**

Family Name: _____
 Address: _____
 City: _____
 Province: _____ Postal Code: _____
 Home Ph #: _____ Cell Ph #: _____
 e-mail: _____ Date: _____

Members Names	Date of Birth d/m/y	Status		Category (Office Use Only)
		Rider – R	Non Rider - NR	

Fees:

Membership \$25.00

Volunteer Fee \$50.00

(Refundable upon completion of Volunteer Requirements)

- Family Membership will be required to complete 4 hours Volunteering for the Club per Riding Member
- Volunteer hours MUST be completed to be eligible for Winter Series Prizes

I have read, understand and accept the terms of the Volunteer Fee as outlined above.

I received a copy of the Thorsby Gymkhana Club Rule Book and understand that the Executive of the Thorsby Gymkhana Club has the right to cancel this membership at any time.

X _____
 PARTICIPANT'S SIGNATURE

TOTAL: \$75.00

Freedom of Information and Privacy Act:

I hereby give permission for any of the above names and pictures to be used for the **Thorsby Gymkhana Club** material such as programs, websites, etc.

I, hereby understand, that I take full responsibility and I WAIVE ALL CLAIMS against the **Thorsby Agricultural Society** and the **Thorsby Gymkhana Club**, its executives, directors, members, agents, contractors, employees, and facilities, thereof for any and all injury, loss or damage, which I or my property may sustain.

X _____
 PARTICIPANT'S SIGNATURE

X _____
 PARTICIPANT'S SIGNATURE

If members are under 18 years of age, parent/guardian signature must accompany membership form.

Parent/Guardian Names: _____

Parent/Guardian Signature: _____

****Each application must be accompanied by the *Equestrian Activities Waiver and Release of Liability* form.****

Office Use Only:

Cash: _____ Check: _____ Date Paid: _____ Initials Rec'd By: _____

This form must accompany all Thorsby Gymkhana Club membership applications.
EQUESTRIAN ACTIVITIES

WAIVER AND RELEASE OF LIABILITY

Warning:

THIS RELEASE OF LIABILITY AFFECTS YOUR LEGAL RIGHTS. BY SIGNING IT, YOU ARE GIVING UP IMPORTANT CLAIMS. DO NOT SIGN IF YOU HAVE NOT READ IT, UNDERSTAND IT, OR HAVE ANY QUESTION ABOUT ITS MEANING.

In consideration of being allowed to participate in any way in the **Thorsby Agricultural Society** and the **Thorsby Gymkhana Club** equestrian program, related events, and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including:
 - a. The potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
 - b. That medical attention and resources may not be immediately available should I be injured, and
 - c. That other participants may, through no involvement of the **Thorsby Agricultural Society** and the **Thorsby Gymkhana Club**, cause injury or death, and
 - d. That activities involve live animals, which are inherently unpredictable and dangerous.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe an unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, HEREBY RELEASE AND HOLD HARMLESS **Thorsby Agricultural Society** and the **Thorsby Gymkhana Club**, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERTSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____
PARTICIPANT'S SIGNATURE

X _____
PARTICIPANT'S SIGNATURE

X _____
WITNESS SIGNATURE

Date Signed: _____

FOR PARTICIPANTS OF MINORITY AGE

(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant(s) as listed on the Thorsby Gymkhana Club Membership, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assign, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

X _____
PARENT/GUARDIAN SIGNATURE

EMERGENCY PHONE NUMBER

X _____
WITNESS SIGNATURE

Date Signed: _____