EQUESTRIAN ACTIVITIES WAIVER AND REALEASE OF LIABILITY - UNDER 19 YEARS OF AGE

In consideration of being allowed to participate in any way in the <u>Prince George Rodeo Association</u> equestrian program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

Ini	itial Each Item below after Reading and Understa	inding each item:	
	·	pant and am executing this waiver on behalf of the I Vaiver be binding on myself and the Infant Participal	
		nzards and risks ("Risks") associated with "Equine Ac that the "Risks" of "Equine Activities" mean those d nited to:	
	the propensity of any equine to behave in vectorial collide with, bite or kick other animals, people.	ways that may result in injury, harm or death to per ple or objects;	•
	or other animals and hazards such as subsu 3. the potential for other participants to beh	ave in a negligent manner that may contribute to in	
	failing to act within their abilities to maint: I freely accept and fully assume all responsibilit resulting from the Infant Participant's participa	y for all "Risks" and possibilities of any and all perso	onal injury, death, property damage or loss
	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 Infa 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".		
	In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kexecutors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and ass (collectively our "Legal Representatives") agree: 1. to waive all claims that the Infant Participant has or may have in the future against the "Host";		
	 to release and forever discharge the "Host' Participant, or our "Legal Representatives" any cause, including but not limited to negligence (failure to use such care as a duty imposed by law, breach of contract or to be liable for and to hold harmless and in 	"from all liability for personal injury, death, propert might suffer as a result of the Infant Participant's p reasonably prudent and careful person would use u mistake or error in judgment of the "Host"; and demnify the "Host" from all actions, proceedings, cl	ry damage, or loss that I, the Infant articipation in "Equine Activities" due to under similar circumstances), breach of any laims, damages, costs demands, including
П	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 with the Infant's participation in "Equine Activities".		
	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. An 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".		
	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".		
Plea	se Print Clearly		
Infant Participant's Name:		Date of Birth:	
Addı	ress:		
	City	Province	Postal Code
Pare	nt/Guardian's Name:	Date of Birth: _	
	ress:	Province	Destal Code
City			Postal Code
Signs	ature of Parent/Guardian of Infant Participant	Signed this day of	, 20
JISTIC	active of Fareing Oddinan of Infant Faritupant		
Print	Name of "Host" Witness to Signing and Initialling	Signature of "Host" Witness	