



# SUN MEADOWS EQUESTRIAN CLINICS WITH LESLIE REID JULY 13-14 & OCT 12-13, 2019

We are very pleased to welcome back Leslie, Level III Dressage coach and 3-time Olympian for two clinic dates in 2019. You are welcome to book one or both clinic dates, however, we will work on a first come, first serve basis and can accommodate 8 riders per day.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

HCBC number \_\_\_\_\_ Horse and level: \_\_\_\_\_

	Sat July 13	Sun July 14	Sat Oct 12	Sun Oct 13	Total
Lessons @ \$265.00					
Stabling @ \$30 per day/part of day					
Haul in or Drop in @ \$15 per day/part of day					
Audit @ \$20 per day/part of day					

**Costs: Lesson @ \$265** for 45 minutes. We are limited to 8 riders per day. **Stabling @ \$30** per for day or part of day, you are welcome to come in on the Friday, please indicate this and allow for additional stabling cost.

**Haul in/Drop in fee @ \$15** per day.

Lunch and Homemade cake and coffee will be served during the breaks. Lessons will include a homemade dinner at the house on Saturday evening – auditors are also welcome at a cost \$20 per head for dinner.

<b>\$265 per lesson</b>	\$
<b>Stabling \$30 per day/part of day</b>	\$
<b>Haul or drop in fee \$15 per day/per horse</b>	\$
<b>Audit \$20 per day</b>	\$
<b>Saturday Dinner for auditors \$20</b>	\$
<b>5% GST</b>	\$
<b>Total</b>	\$

**Riders** In order to hold your place a **non-refundable deposit** of 50% of the total is requested, full and final payment to be received 30 days before the commencement of the clinic. Please complete and email along with e-transfer to: [sunmeadowsequestrian@gmail.com](mailto:sunmeadowsequestrian@gmail.com)

Sun Meadows Equestrian Centre, 7373 Barnhartvale Rd, Kamloops V2C 6V8 250 573 5812

**RELEASE FORM BELOW AND WAIVER MUST BE FILLED IN AND SIGNED**

**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 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 (the Participant) with and for the benefit of: SUN MEADOWS EQUESTRIAN CENTRE, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting the 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 each item:

\_\_\_\_\_ 1. 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 understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself and the "Host", and it is binding on myself and my "Legal Representatives".

\_\_\_\_\_ 7. I confirm that I have reached the age of majority in the province in which I am participating in "Equine Activities".

Please Print Clearly

Participant Name \_\_\_\_\_ DOB B \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_

Postal \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

Email \_\_\_\_\_ Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(Signature of Participant) \_\_\_\_\_

(Print Name of "Host" Witness to Signing and Initialing)

\_\_\_\_\_ Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(Signature of "Host" Witness)

Date Signed