

STILLAGUAMISH VALLEY HORSEMEN RELEASE AND WAIVER OF LIABILITY AGREEMENT

I acknowledge that I will be participating as a volunteer and/or participant in the Stillaguamish Valley Horsemen (SVH) Summer gaming series, May 2024 thru August 2024, at the Stanwood Fairgrounds.

I AM AWARE OF THE COVID-19 PANDEMIC AND RELATED GOVERNMENTAL ORDERS, DIRECTIVES AND GUIDELINS (COLLECTIVELY "Directives") INCLUDING DIRECTIVES FOR FREQUENT HAND WASHING, SOCIAL DISTANCING AND USE OF FACE MASKS IN PUBLIC LOCATIONS. I AM AWARE THAT THESE ACTIVITIES ARE OCCURRING IN A PUBLIC LOCATION DURING THE COVID-19 PANDEMEC, AND ALSO POTENTIALLY INVOLVE LIVESTOCK AND ARE THEREFORE HAZARDOUS ACTIVITIES. I AM AWARE THAT I COULD BE INFECTED, SERIOUSLY INJURED OR EVEN DIE DUE TO COVID-19 OR DUE TO THE ACTIVITIES ON THE PREMISIS INCLUDING BUT NOT LIMITED TTO EXHIBITOR AND LIVESTOCK ACTIVITIES, I AM VOLUNTARILY PARTICIPATING IN THESE ACTIITIES WITH THE KNOWLEDGE OF THE DANGER INVOLVED AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: _____ Parent or Guardian's initials of volunteer, staff or participants under 18 years of age: _____

As consideration for being permitted to participate in these activities and use of Facilities, I forever release the Governing Body, the State, the Department and any District affiliated organization, along with their respective directors, officers, employees, volunteers agents, contractors and representatives (collectively "Releasees" _ from any and all liabilities, causes of action, lawsuits, claims, demands or damages of any kind whatsoever that I, my assignees, heirs, distributes, guardian's, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death or property damage, related to (i) my participation in these activities (ii) the negligence or other acts of any Releasee, whether directly connected to these activities or not, and however caused, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I also agree that I, my assignees, heirs, distributes, guardian's, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with and of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS, I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSENF AND THE DISTRICT, THE STATE AND THE DEPARTMENT, AND SIGN IT OF MY OWN FREE WILL.

By selecting the "I agree" button, I am signing this document electronically. I agree that my electronic signature is the legal equivalent of my manual/handwritten signature on this document.

If you are under 18 years of age, you and your parents or guardian must sign and initial this form where indicated.

Adult / Parent or Guardian's I AGREE

Signature _____ Name: _____ Date _____

Signature _____ Name: _____ Date _____

Minor

Signature _____ Name: _____ Date _____

Stanwood-Camano Community Fair Here after referred to as "Fair"
Event Hold Harmless Agreement Stillaguamish Valley Horseman Event

Name _____ D.O.B _____ / _____ / _____ AGE _____

Name _____ D.O.B _____ / _____ / _____ AGE _____

PHONE _____ EMAIL _____

TO BE COMPLETED BY EVERY FAIR ENTRANT

DISCLAIMER: THE FAIR IS NOT RESPONSIBLE FOR ANY INJURY, INCLUDING DEATH, OR LOSS OF PROPERTY TO ANY PERSON SUFFERED WHILE ON THE PREMISES OR PARTICIPATING IN THE USE OF THE FAIR AND ITS FACILITIES/GROUNDS FOR ANY REASON INCLUDING BUT NOT LIMITED TO THE RIDING, PRACTICING OR SPECTATING OF ANY ACTIVITY OCCURRING IN OR ABOUT THE FAIR PREMISIES.

In consideration of my participation in and the use of the Fairs facilities I hereby release and covenant not to sue the Fair, its directors, officer's, representative, and volunteers from any and all present and future claims resulting from ordinary negligence and inherent risk of use of the facilities and grounds of the Fair including but not limited to any loss, injury, damage, or liability sustained by me while on or about the premises of the Fair.

I am fully aware and understand that the fair does not have on or about the premises, or employ or contract with any medical services, provisions for ordinary or emergency medical services.

I am fully aware and understand that such loses, injury, disability or death may result from the actions, inactions or negligence on my part, on the part of the club, on the part of other, the rules of play or the condition of the Fair's premises and grounds.

I agree that immediately prior to participating in any activity in or about the fairs grounds I will inspect the grounds and equipment to be used and if any defect is apparent, I will not use the equipment or the grounds and notify the superintendent of the Fair of the defects.

I further agree that if I am not knowledgeable in the proper use of the Fairs, activity, or equipment I will obtain proper instruction for the correct use of such activity or equipment from a qualified individual before I will participate in the activity or use the equipment.

I further agree to indemnify and hold harmless the Fair, its directors, officer's, representatives, and volunteers from any and all claims arising from my involvement in or receiving instruction for the Fair activities incidental thereto wherever, whenever and however the claims may arise including but not limited to travel to and from the Fair or related activity site and participation at remote sites.

I assume all the foregoing risk and accept personal responsibility for any damages and loss following any loss property, injury, permanent disability or death resulting there from.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER, RELEASE ANY ASSUMPTION OF RISK AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS WAIVER, RELEASE AND ASSUMPTION OF RISK AND SIGN IT VOLUNTARILY.

By selecting the "I agree" button, I am signing this document electronically. I agree that my electronic signature is the legal equivalent of my manual/handwritten signature on this document.

Any person under the age of 18 years must have a parent or guardian co-sign this form.

Adult / Parent or Guardian's I AGREE

Signature _____ Name: _____ Date _____

Signature _____ Name: _____ Date _____

Minor

Signature _____ Name: _____ Date _____

Signature _____ Name: _____ Date _____

Signature _____ Name: _____ Date _____

STILLAGUAMISH VALLEY HORSEMAN MEMBERSHIP APPLICATION

FIRST AND LAST NAME	BIRTHDATE (mm/dd/yy)	HORSE'S NAME (Barn name)	BLANKET SIZE	SADDLE SIZE	JACKET SIZE (adult or youth)	MULLIGAN? (for one series)
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address (including city, state zip):		Email Address:		Phone Number:		

Individual \$30.00: \$ _____
 Family \$40.00: \$ _____
 Mulligans \$10.00 each: \$ _____
Total: \$ _____

- Family members must be living at the same residence and have a single address. Family membership can be extended to related minor children living with other family members.
- Member's yearend points will accumulate after membership is received. Points earned before membership will not count.

ONLY MEMBERS are eligible for season end awards and must ride a majority of shows to be eligible for awards.

EMERGENCY CONTACT NAME _____ EMERGENCY CONTACT NUMBER _____

SIGNATURE of member or parent/guardian (if under 18) _____

PRINT NAME _____ DATE _____

WAIVER OF LIABILITY STATEMENT AND BASIC RESPONSIBILITIES OF PARTICIPANTS

IN CONSIDERATION OF STILLAGUAMISH VALLEY HORSEMAN GRANTING ME PERMISSION TO ENTER ITS EVENTS AND USE ITS PROPERTY, I HEREBY VOLUNTARILY WAIVE ALL CLAIMS FOR DAMAGE OR LOSS TO MY PERSON AND PROPERTY OR THE PERSON OR PROPERTY OF ANY MEMBER OF MY FAMILY WHICH MAY BE CAUSED BY ANY ACT OR FAILURE TO ACT OF STILLAGUAMISH VALLEY HORSEMAN, ITS OFFICERS, AGENTS, VOLUNTEERS, OR EMPLOYEES. ON BEHALF OF MYSELF AND THE MEMBERS OF MY FAMILY, I VOLUNTARILY ASSUME THE RISK OF ALL DANGEROUS CONDITIONS. ON BEHALF OF MYSELF AND MEMBERS OF MY FAMILY, I HEREBY RELEASE AND FOREVER HOLD HARMLESS STILLAGUAMISH VALLEY HORSEMAN, ITS OFFICERS, AGENTS, VOLUNTEERS, OR EMPLOYEES FROM ANY CLAIM THAT MAY ARISE AGAINST ANY OF THEM ARISING AT ANY PROPERTY THAT AN EVENT OR MEETING IS HELD, OR ARISING FROM THE ABOVE DESCRIBED EVENT. EACH PARTICIPANT AND/OR GUARDIAN IS RESPONSIBLE FOR THEIR OWN RIDING EQUIPMENT AND THEY ARE TO MAINTAIN CONTROL OVER THEIR OWN HORSE(S) AT ALL TIMES. ALL MINORS MUST HAVE A GUARDIAN PRESENT AT ALL EVENT OR MEETINGS AND IS SOLELY RESPONSIBLE FOR THEIR MINOR. THE GUARDIAN MUST ALSO BE IN VIEW OF THEIR MINOR AT ALL TIMES DURING ANY EVENTS OR MEETINGS BEING HELD BY STILLAGUAMISH VALLEY HORSEMAN. WASHINGTON STATE WAC RULE 4.24.540 EQUINE LIABILITY LAW APPLIES TO ALL PARTICIPANTS.

Check out our website www.svhclub.org