

Uxbridge Horsemen's Association Inc. 2025 Fall Fair Western Speed Events and Games Entry Form, Saturday September 6, 2025

Entry Number:	
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- Please register no later than 9 pm Thursday September 4, 2025 at uxbridgehorsemen.com
- All riders and owners (if they are different) are required to carry their own liability insurance of no less than \$5 million dollars. You may be asked for proof of insurance and/or your age. Bring your documents with you.
- One entry form per horse and rider combination, please print clearly to ensure accurate pronunciation by the announcer.

 Start time is 8:30 am sl 	harp
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built time is old turn sharp					
Date:	Horse:		Barn/Coach:		
Rider Name:		Rider Email:			
Owner: (if different from ride	r)	Owner Email: (if different from rider)			
Rider Insurance Provider: (if owner)	different from	Rider's	Policy # and Expiry Date: (if different from owner)		

Division	Class # Class Name		ne	UHA Member	Non Member	Total	
				Fee	Fee		
	1	Steady Hand		\$ 5.00	\$ 10.00		
G 11	2	Egg & Spoon		\$ 5.00	\$ 10.00		
Gymkhana Games	3	Team Command		\$ 5.00	\$ 10.00		
Games	4	Musical Stalls		\$ 5.00	\$ 10.00		
	5	Scudaho		\$ 5.00	\$ 10.00		
	6	Pony Express		\$ 5.00	\$ 10.00		
DASH	7	Down and Back Youth		\$ 5.00	\$ 10.00		
FOR	8	Down and Back Adult	\$ 5.00	\$ 10.00			
CASH	9	Dash for Cash Open 3D \$20	\$ 20.00	\$ 30.00			
FLAG	10	Flag Youth		\$ 5.00	\$ 10.00		
FLAG	11	Flag Adult		\$ 5.00	\$ 10.00		
	12	Flag Open \$200.00 added r	noney	\$ 20.00	\$ 30.00		
		******Lun	ch Break*****				
	13	Poles Youth		\$ 5.00	\$ 10.00		
POLES	14	Poles Adult		\$ 5.00	\$ 10.00		
	15	Poles Open 3D \$200.00 add	ded money	\$ 20.00	\$ 30.00		
	16	Barrels Youth		\$ 5.00	\$ 10.00		
BARRELS	17	Barrels Adult		\$ 5.00	\$ 10.00		
	18	Barrels Open 3D \$500.00 a	dded money	\$ 30.00	\$ 40.00		
Administration Fee:							
Total Payable for show entry:							
Please Circle Method of Payment:							
Etransfer		Cash Cheque		Total Monies Paid:			

UXBRIDGE HORSEMEN'S ASSOCIATION INC., WAIVER AND INDEMNITY FORM FOR ALL EVENTS

Waiver, Indemnity and Consent Agreement: I for myself, my heirs, executors, administrators, successors and assigns, hereby release, waive and forever discharge the Uxbridge Horsemen's Association, all other associations, sponsoring companies, municipalities and owners and tenants of any property through which the Uxbridge Horsemen's Association events may take place, their respective agents, officials, employees, representatives, successors and assigns, of and from all claims, demands, cost, and expenses in respect of death, injury, loss or damages of any kind to me, my horse or property howsoever caused, arising or to arise by reason of my participation in any association events, whether prior to, during or subsequent to the event notwithstanding that same may have been the result of the negligence of any of the aforesaid. The undersigned assumes the unavoidable risk inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider and spectator. In consideration, therefore, for the privilege of participating in The Uxbridge Horsemen's Association event, riding and working around horses at the Uxbridge Horsemen's Association Inc., events, held at The Uxbridge Fall Fair in Elgin Park, Uxbridge Ontario, the undersigned does hereby agree to hold harmless and indemnify The Uxbridge Horsemen's Association Inc., and its members and executive committee, The Corporation of the Town of Uxbridge and the Uxbridge/Scott Agricultural Society and further releases them from any liability or responsibility for accident, damage, injury or illness to the undersigns or to any horse owned, leased, rented or borrowed by the undersigned or to any family member or spectator accompanying the undersigned on the premises. I further undertake to hold and save harmless and agree to indemnify all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result or in any way connected to my participation in any of the Uxbridge Horsemen's Associat

incurred by any or all of them arising as a result or in any way connected Association's events.	l to my participation in any of the Uxbridge Horsemen's
Please acknowledge this Waiver of Indemnity and Consent Disclai	mer above by Initialing here:
Owner Insurance Statement \$5,000,000.00 INSURANCE LIABILITY STATEMENT: I warn Association or participant in this event (show, clinic, trail ride of liability insurance and that it is in force as of the date of this event horse(s) whether owned, leased, borrowed or rented.	etc.) that I carry \$5,000,000.00 (FIVE MILLION) dollars of
Please acknowledge the \$5,000,000 Insurance Liability State	tement above by Initialing here:
Name of Insurance Company covering your horse(s):	
Policy #	Expiry date:
Name (please print)	Today's Date:
Signature: (Signature of parent or guardian if member is under	18)
All riders must wear ASTM approved Protective helmets. I hereby understand that Uxbridge Horsemen's Association, all other assistenants of any property through which the Uxbridge Horsemen's Associatemployees, representatives, successors and assigns, are absolved from a por refusal to wear protective headgear while on taking part in an Uxbrid children in my care. Please acknowledge this Protective Headgear Waiver above	ation events may take place, their respective agents, officials, any responsibility, from any injury resulting from the improper use ge Horsemen's Association Inc., event. This includes any minor
Photographs and Video Disclaimer: Uxbridge Horsemen's Association any event sponsored by UHA, without the expressed written permission photograph/video in publications or other media material produced, use invitations, books, newspapers, magazines, television, websites, etc. To exidentified using full names or personal identifying information without viguardian. A person attending a UHA event who does not wish to have the to the photographer, and/or the event organizers, and/or contact UHA a intentions and include a photograph. UHA will use the photo for identification under the photograph of the event or by failing to notify UHA, in writing your desire to not have hold harmless and indemnify UHA from any and all claims involving the affiliated with UHA may not use, copy, alter or modify UHA photographs without the advance written permission of an authorized designee from Please acknowledge our Photograph and Video Disclaimer as By submitting this Waiver and Indemnity Form I acknowledge agree to all of the above content. INITIAL HERE:	of those included within the photograph/video. UHA may use the ed or contracted by UHA including but not limited to: brochures, ensure the privacy of individuals and children, images will not be written approval from the photographed subject, parent or legal eir image recorded for distribution should make their wishes known at P.O. Box 1494, Uxbridge, Ontario L9P 1N6, in writing of his/her cation purposes and will hold it in confidence. By participating in a your photograph used by UHA, you are agreeing to release, defend, use of your picture or likeness. Any person or organization not graphics, videography or other, similar reproductions or recordings UHA. Thank you for your understanding and cooperation!

Please make payment by etransfer to shows@uxbridgehorsemen.com. Please use the password Fair2025
Please include the name of the Rider in the memo portion of your etransfer

Premises #: ON4232599202018