



Uxbridge Horsemen's Association Inc.
 2023 Fall Fair Competitive Western Speed Events
 Entry Form, Sunday September 10, 2023

Entry Number:

- Start time is 9:00 am SHARP, please register **ONLINE** at www.uxbridgehorsemen.com, no later than Thursday September 7, 2023
- **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.
- *Denotes English or Western Tack.

Date:	Horse:	Barn/Coach:
Rider Name:		Rider Email:
Owner: (if different from rider)		Owner Email: (if different from rider)
Rider Insurance Provider: (if different from owner)		Rider's Policy # and Expiry Date: (if different from owner)

Division	Class#	Class Name	UHA Member Fee	Non Member Fee	Total
KEYHOLE	1	Keyhole Open \$150.00 added money	\$15.00	\$ 25.00	
STAKE RACE	2	Stake Race Open \$150.00 added money	\$15.00	\$ 25.00	
DASH FOR CASH	3A	Down and Back Youth	\$ 5.00	\$ 10.00	
	3B	Down and Back Adult	\$ 5.00	\$ 10.00	
	3C	Dash for Cash Open 3D \$200.00 added money	\$20.00	\$ 30.00	
FLAG	4A	Flag Youth	\$ 5.00	\$ 10.00	
	4B	Flag Adult	\$ 5.00	\$ 10.00	
	4C	Flag Open \$200.00 added money	\$20.00	\$ 30.00	
*****Lunch Break*****					
POLES	5A	Poles Youth	\$ 5.00	\$ 10.00	
	5B	Poles Adult	\$ 5.00	\$ 10.00	
	5C	Poles Open 3D \$200.00 added money	\$20.00	\$ 30.00	
BARRELS	6A	Barrels Youth	\$ 5.00	\$ 10.00	
	6B	Barrels Adult	\$ 5.00	\$ 10.00	
	6C	Barrels Open 3D \$500.00 added money	\$30.00	\$ 40.00	
Administration Fee:					\$ 10.00
Total Payable for show entry:					
For Office use ONLY:	Payment type:		Membership payments:		
	Cash	Cheque	Total Monies Paid:		

Please make payment by etransfer to treasurer@uxbridgehorsemen.com. Please use the password Fair2023
 Premises #: ON4232599202018

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 Association's events.

Please acknowledge this Waiver of Indemnity and Consent Disclaimer above by Initialing here:

Owner Insurance Statement

\$5,000,000.00 INSURANCE LIABILITY STATEMENT: I warrant that as a member of the Uxbridge Horsemen's Association or participant in this event (show, clinic, trail ride etc.) that I carry **\$5,000,000.00 (FIVE MILLION)** dollars of liability insurance and that it is in force as of the date of this event for all activities relating to the use and enjoyment of my horse(s) whether owned, leased, borrowed or rented.

Please acknowledge the \$5,000,000 Insurance Liability Statement 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) _____

PROTECTIVE HEADGEAR WAIVER:

All riders must wear ASTM approved Protective helmets.

I hereby understand that 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, are absolved from any responsibility, from any injury resulting from the improper use or refusal to wear protective headgear while on taking part in an Uxbridge Horsemen's Association Inc., event. This includes any minor children in my care.

Please acknowledge this Protective Headgear Waiver above here:

Photographs and Video Disclaimer: Uxbridge Horsemen's Association Inc. (UHA) reserves the right to use any photograph/video taken at any event sponsored by UHA, without the expressed written permission of those included within the photograph/video. UHA may use the photograph/video in publications or other media material produced, used or contracted by UHA including but not limited to: brochures, invitations, books, newspapers, magazines, television, websites, etc. To ensure the privacy of individuals and children, images will not be identified using full names or personal identifying information without written approval from the photographed subject, parent or legal guardian. A person attending a UHA event who does not wish to have their image recorded for distribution should make their wishes known to the photographer, and/or the event organizers, and/or contact UHA at P.O. Box 1494, Uxbridge, Ontario L9P 1N6, in writing of his/her intentions and include a photograph. UHA will use the photo for identification purposes and will hold it in confidence. By participating in a UHA event or by failing to notify UHA, in writing your desire to not have your photograph used by UHA, you are agreeing to release, defend, hold harmless and indemnify UHA from any and all claims involving the use of your picture or likeness. Any person or organization not affiliated with UHA may not use, copy, alter or modify UHA photographs, graphics, videography or other, similar reproductions or recordings without the advance written permission of an authorized designee from UHA. Thank you for your understanding and cooperation!

Please acknowledge our Photograph and Video Disclaimer above by Initialing here:

By submitting this Waiver and Indemnity Form I acknowledge that I have read, understood and agree to all of the above content. INITIAL HERE:

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