



Chagrin Valley Hunt Foxhunting Clinic

One entry form per horse & rider

\$35 per rider

Please make checks payable to:
Chagrin Valley Hunt

Rider Name _____ Rider under age of 18? Y / N

Address _____

City, State & Zip _____

Phone Number _____ Email _____

Check here if you would like to be notified via email of future events.

Horse Name _____ Horse Age _____

Mare / Gelding / Stallion?

Emergency Contact Name: _____

EC/ Phone: _____ E/C Relation to Rider _____

Release, Assumption of Risk, Waiver and Indemnification. **This document waives important legal rights. Read it carefully before signing.**

I hereby enter the above event at my own risk. **I agree** in consideration for my participation in the Chagrin Valley Hunt Fieldhunter Clinic at Hunter's Creek Farm ("Event") to the following: I agree that I choose to participate voluntarily in the competition with my horse, as a rider, driver, handler, longeur, lessee, owner, agent, coach, trainer, or as a parent or guardian of a minor participant. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("Harm"). I agree to release the Chagrin Valley Hunt ("CVH"), Hunter's Creek Farm, and Carol Donaldson ("Sponsors") from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the Sponsors or the Competition. I agree to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Sponsors or the Competition. I agree to indemnify (that is, to pay any losses, damages, or costs incurred by) the Sponsors and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse at the Competition. I agree to wear a protective helmet with a fasted chin strap while mounted, as well as other protective gear of my choice, although I understand that no protective equipment can guard against all injuries. If I am a parent or guardian of a minor participant, I consent to the child's participation and agree to assume all of the obligations of the Release on the child's behalf. I agree that 'the Sponsors' and 'the Competition' as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers, and affiliated organizations. I represent that I have the requisite training, coaching and abilities to safely participate in this event.

By signing below, I agree to be bound by all terms and provisions of this entry form.

Signature of rider, or parent/guardian signature if rider is under 18

Date

For Chagrin Valley Hunt Registration Staff to fill out after registration is submitted.

Paid via: _____