For Participants <u>UNDER THE AGE OF MAJORITY</u> 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!

The follow	uina waiwa		•		d and Understa				•		of this agr	oomont ara
					ability, assum ant named l					ner terms	of this agr	NVIHA its
directors, limiting t	, officers, e he general	employees, ity of the fo	volunteers, oregoing, "E	business quine Act	operators, a ivities" includitions apply for	gents and s de but are r	site propert not lim <mark>ited</mark> t	y owners or o trail rides	lessees (co	-		"). Without
Initial Each	Item below a	after Reading	and Understar	nding Each It	em:							
1.					nd I am executir Junior Participa			e Junior Partic	ipate in my ca	pacity as Pa	rent/Guardiaı	n and with the
2.	common of but not lim	ccurrence. I ai	m aware that t	he "Risks" o	and risks (colled f "Equine Activit ys which may re	ties" mean tho	ose dangerous	conditions whi	ch are an integ	gral part of "	Equine Activit	ties", including
	kick o	ther animals,	people or obje	cts;	•			•		•		
			of an equine' s subsurface ob		to such things	as sounds, suc	lden movemer	its, tremors, vi	brations, unfa	miliar object	ts, persons or	other animals
	(c) and t	he potential fo		pants to bel	nave in a neglige ne.	ent manner wh	nich may contri	bute to injury	to themselves	or others, ir	ncluding failin	g to act within
3.		•	ume all respor n in "Equine Ac	•	II "Risks" and po	ossibilities of a	ny and all pers	onal injury, de	ath, property o	damage or lo	oss resulting f	rom the Junior
4.	"Equine Ac	tivities" comp	letely safe. I a	ccept these	educe the "Risk "Risks" and agre ligation to myse	e to the term	s of this waiver	on behalf of t	he Junior Parti	cipant, even	if the "Host"	is found to be
	(a) to wa (b) to rel Repre neglig breac (c) and to on a s in "Ec I agree that "Equine Ac agree that or Territory I confirm tha	ive all claims tease and forevesentatives" magence (failure to be liable for a colicitor and or quine Activities this waiver an tivities" are proposed for the court of Canada in the label and such as the label	that the Junior yer discharge to a suffer as to use such ca or mistake or e and to hold hall with client basis s.". If all terms co rovided by the can exercise jubic the "Equificient time to	Participant I he "Host" fr a result of re as a reascerror in judgr mless and ir , and liabiliti ntained here "Host". I hurisdiction ouine Activitied	/her heirs, next has or may have om all liability for the Junior Partionably prudent ment of the "Hondemnify the "Hes of whatsoeve ereby irrevocability or the terms ares" are provided inderstand this work or Participant, a	in the future or any persona icipant's particand careful pest"; ost" from all a er nature or kind exclusively a ly submit to the claims reference.	against the "Ho il injury, death, cipation in the erson would us ctions, proceed and arising out of and in all respe are exclusive jured to herein. The index arising out of the control of the area of the control of the control of the control area of the control	ost"; property dam "Equine Active under simila dings, claims, d of or in any wa ects by the law risdiction of th Any litigation	age, or loss the rities" due to a recircumstance amages, cost of y connected we as of the Province courts of the to enforce this agreement re	at I, the Juni any cause, in es), breach o demands, inc ith the Junic nce or Territ at Province o waiver will b	or Participant neluding but of any duty im cluding court or Participant' cory of Canador Territory or be instituted in entire agrees	t, or our "Legal not limited to nposed by law, costs and costs 's participation a in which the f Canada and I in the Province
Junior Parti	cipant's Nam	e:				!	Date of Birth: _					
Address:					City: Province: Postal Code:							
Parent/Guardian's Name:						C	ate of Birth:					
Address:					City: Province: Postal Code:							
Phone Number:					Email Address:							
					Signed this day of, 20							
			Junior Particip	•								
					gned this		_ day of, 20			, 20		
(Signature of "Host" Witness)					H.C.#			NVIHA: Y / N				
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
202												