



BRACEBRIDGE AGRICULTURAL SOCIETY

P.O. Box 53, Bracebridge, ON, P1L 1T5

Telephone: (705) 645-8383

E-mail: bracebridgefair@hotmail.com

Website: www.bracebridgefair.com

#

Date: _____

**APPLICATION TO PARTICIPATE AND RELEASE
SPORT PONY AND BREEDERS SHOW**

Participant's Name: _____ Phone #: _____
(Rider)

Mailing Address (Home): _____

Name of Horse: _____

Name of Owner: _____ Email Address: _____

TERMS & CONDITIONS: PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of being allowed to participate in this event, I hereby assume all risks and I hereby release and absolve the BRACEBRIDGE AGRICULTURAL SOCIETY, and their officials, volunteers, officers and/or Directors or the owners of the land upon which the competition is held from all responsibility, liability or claims of any nature and kind which I may have arising from my participation in this activity, including but not limited to bodily injury or death to myself or any horse(s) and damage to property arising from any cause whatsoever, including the negligence of one or more of the individuals and organizations referred to herein.

If the proposed participant is 16 years and under, this form must be signed by a parent or guardian.

I/We hereby confirm that there is liability coverage in force with respect to the ownership of the competing horse(s).

Yes () No () _____
Name of Insurance Company Policy No

Check the Class Number(s) you wish to enter:

- Class 1 Current Year Foal () Class 2 Yearling () Class 3 Two Year Old ()
- Class 4 3+ Mare () Class 5 3+ Gelding () Class 6 3+ Stallion ()
- Class 7 Hunter Suitability U/S () Class 8 Dressage Suitability U/S ()

IN WITNESS WHEREOF, each of the undersigned has hereunder set his/her hand at the date set out above.

Membership Fee: \$ _____
(\$5.00 or proof of pre-paid membership) Participant. I am 16 years or older

Entry Fee \$ _____
(\$8.00 per class)

Total Paid \$ _____
Parent / Guardian if participant under 16 years