

## Meadow Creek Vaulting Club - Summer Clinics 2019 - Registration Form

Please select which date(s) you are registering for:

Sunday August 4<sup>th</sup> 1:00-4:00PM \_\_\_\_\_

Sunday August 18<sup>th</sup> 1:00-4:00PM \_\_\_\_\_

Each clinic is \$45/participant

Vaulters name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Alberta Equestrian Federation Membership Number: \_\_\_\_\_ (if applicable)

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Vaulters Alberta Health Care Number: \_\_\_\_\_

Vaulters Medical Doctor Name: \_\_\_\_\_

Doctors Phone Number: \_\_\_\_\_

Emergency Contact Name and Number: \_\_\_\_\_

Allergies or Other Medical Concerns Coaches Should be Aware Of: \_\_\_\_\_

Date of Last Tetanus Shot: \_\_\_\_\_

### **Permission To Seek Medical Treatment**

I (parent/guardian's name) \_\_\_\_\_ as the parent/guardian of (child's name) \_\_\_\_\_ hereby give permission to the coaches of the Meadow Creek Vaulting Club to provide first aid for my child, or to transport my child to a doctor or hospital or to arrange for ambulance transportation for my child, in the event of an accident or emergency when I cannot immediately be contacted. I further authorize any necessary medical treatment necessary for my child.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Meadow Creek Vaulting Club and Creekside Equestrian Centre Ltd. - Liability Waiver**

(MEADOW CREEK VAULTING CLUB HEREAFTER CALLED: MCV C)

Please read the following before signing.

Most of the activities of MCV C and Creekside Equestrian Centre Ltd. involve the use of horses. While we attempt to adhere to a strict safety program, you must realize that these lovable animals are living creatures with minds of their own. In any activity involving horses, there is always some inherent risk of injury, property damage, and even death. In vaulting there are also inherent risks associated with the gymnastics element of the sport. By signing the following contract you will be assuming all liability for injury or damage to yourself, your child (ren) or your property.

The Vaultler, Participant, and/or the parent/guardians of the minor children, HEREBY COVENANTS AND AGREES that neither the MCV C and/or Creekside Equestrian Centre Ltd. coaches, lungers, members, directors, their heirs, successors, assigns or employees, or any of them, individually or collectively, will be responsible for any accident that may occur or be caused by any horse, rider, vaultler or other person, animal or equipment, or for any article of any kind or nature that may be lost or destroyed or in any way damaged. Each person using the premises, and/or the services of the MCV C and/or Creekside Equestrian Centre Ltd. off the premises will be responsible for any injury that may be occasioned to any person or animal or for any damage to any property. The vaultler, Participant, and/or parents/guardians of any minor children, agrees to indemnify and hold harmless the MCV C and/or Creekside Equestrian Centre Ltd. coaches, members, directors successors, administrators, assigns or employees, individually and collectively, of and from and against all claims of every kind and nature whatsoever arising out of or which may occur by reason of any accident, and specifically, but without limiting the generality of the foregoing, for any negligence on the part of the MCV C and/ or Creekside Equestrian Centre Ltd. coaches, members, directors, their heirs, successors, administrators, assigns or employees, whether gross or otherwise.

Presentation of this signed agreement shall constitute the entire agreement between the parties and full acceptance of the terms and conditions contained herein.

Vaultler's name: (please print) \_\_\_\_\_

Vaultler's signature: (if over 12 years old) \_\_\_\_\_ Date: \_\_\_\_\_

Parents Name if Vaultler is a minor: (please print) \_\_\_\_\_

Parents Signature if Vaultler is a minor: \_\_\_\_\_ Date: \_\_\_\_\_