



# HIGH COUNTRY CARRIAGE DRIVING CLUB REGISTRATION

CLINIC	DATE	COST INCLUDES 1 LESSON PER DAY	TOTAL FEE
<b>Bonanza Driving Clinic</b>	<b>July 15 to 18 2024</b>	<b>HCCDC members \$450.00</b> <b>Non members \$500.00</b> Meals included for registered drivers. <b>\$150 for accompanying others</b>	<b>\$ .00</b>

**Location: Millarville Racing & Agricultural Society grounds and arena**

**PAYMENTS:**

Minimum (non-refundable) deposit of \$200 required to confirm registration  
 Balance due no later than May 1, 2024

Registration form & E-transfers to [highcountrycarriage@gmail.com](mailto:highcountrycarriage@gmail.com) (auto deposit)  
 Cheques payable to High Country Carriage Driving Club and mail to:  
 PO Box 1136, Bragg Creek, AB T0L 0K0

We are able to keep the costs low thanks to the generous support from casino funds

**PAID BY:** (mark x)

Cheque: \_\_\_\_\_

e-Transfer: \_\_\_\_\_

Cash: \_\_\_\_\_

NAME	
ADDRESS	
CITY, PROV	
POSTAL CODE	AEF # or equivalent (mandatory)
TELEPHONE	<b>H:</b> _____ <b>Cell:</b> _____
e-mail	

Please indicate your preference of clinician:  
 (1<sup>st</sup> to register will have priority choice)

**Clinic Description:** Drivers are expected to be able to safely harness & hitch and be reasonably competent in the box seat as some of the driving areas are not fenced. A contemporary marathon type vehicle is recommended along with suitable equine(s). Private daily lessons working on skills according to you or your equine's level of driving capability.

The final day will be Derby Day.

Dry camping is available on site with space available for self stabling (electric pens or panels).

Meal package includes Sunday evening dinner to final day (Thursday) lunch

**Clinicians:** Ewoud Boom from the Netherlands, Teresa Bonny-Bron, Suzy Stafford and Janelle Marshall from USA

**HELMETS MANDATORY**

For more info contact Sue Winsor at 403 333 3717 or email [winsosu1@gmail.com](mailto:winsosu1@gmail.com)

**ALL PARTICIPANTS MUST READ AND SIGN THE WAIVER PROVIDED**

## ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY (AR-0103)

For Participants Over the Age of Majority 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!**

### Every Person Must Read and Understand this Waiver Before Participating in Equine Activities

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me (the Participant) with and for the benefit of: **HIGH COUNTRY CARRIAGE DRIVING CLUB**, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host").

Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to, competitions, tournaments organized and /or operated by the "Host", riding instruction, coaching and training provided by the "Host" to the Participant.

### Initial Each Item below after Reading and Understanding each item:

1. I am aware that there are inherent dangers, hazards and risks (collectively "Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to:

- (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects;
- (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects;
- (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
- (d) the potential of natural or man-made hazards being present that can cause me harm, including communicable disease.

2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, sickness, disease, medical payments, death, property damage or loss resulting from my participation in "Equine Activities".

3. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to me in my participation in "Equine Activities".

4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns (collectively my "Legal Representatives") agree:

- (a) to waive all claims that I have or may have in the future against the "Host";
- (b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss resulting from my participation in the equine activity due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and
- (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with my participation in "Equine Activities".

5. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".

6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself and the "Host", and it is binding on myself and my "Legal Representatives".

7. I confirm that I have reached the age of majority in the province in which I am participating in "Equine Activities".

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_  
City Province Postal

Signed this \_\_\_\_\_ day of , 20\_\_\_\_  
(Signature of Participant)

\_\_\_\_\_  
(Print Name of "Host" Witness to Signing and Initialing)

Signed this \_\_\_\_\_ day of , 20\_\_\_\_  
(Signature of "Host" Witness)