



Wits End Equestrian Consultants Inc, Wits End Events, Jo Young, Bill McKeen, Amanda Hunter the "Organization"

PARTICIPANT RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS

THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES- PLEASE READ CAREFULLY

Date(s) of Attendance on the Property: _____

By signing below, the Participant (named below) and/or the Participant's Guardian understands and acknowledges, the risks, dangers, and hazards which are inherent on entering all lands, properties, facilities, structures, installations, vehicles or equipment owned, leased, operated or otherwise controlled by the Organization (the "**Premises**"), and, if participating as a rider in the Eventing Kindergarten, the risks of that activity, which risks include, but are not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; close proximity to or contact with surfaces, equipment, fixtures, or other objects that, despite the Organization's efforts, may be infected with COVID-19 or other communicable illnesses; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; tripping hazards; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; the negligent use of the Premises by others; inadequate safety measures or unsafe Premises; other circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officers, therapists, or volunteers (together, the "**Releasees**"); or negligence or omission of the Releasees (collectively, the "**Risks**").

In consideration for allowing the Participant to use the Premises, or participate in the Eventing Kindergarten, the Participant and/or the Participant's Guardian: (a) release, discharge and forever hold harmless the Releasees from any and all liability for damages or loss arising as a result of the Risks arising from entry into or use of the Premises; (b) waive any right to sue the Releasees in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, damages or losses of any kind that may arise as a result of the Risks or in connection with entry into or use of the Premises, including without limitation the right to make a third party claim or claim over against the Releasees arising from the same; and (c) freely assumes all risks associated with the Risks or anything incidental to the Risks, which may arise as a result of or in connection with use of the Premises. **YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION AND RELEASEES.**

COVID-19 ATTESTATION AND AGREEMENT

By signing below, the Participant (named below) or the Participant's Guardian attests that the Participant:

1. Does not knowingly have COVID-19;
2. Is not experiencing any known symptoms of COVID-19, such as fever, cough, shortness of breath or malaise;
3. Has not travelled internationally during the past 14 days;
4. Has not frequented a COVID-19 high risk area in the Province during the last 14 days;
5. Has not, in the past 14 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is self-quarantining after returning to Canada; and
6. Has been following government recommended guidelines in respect of COVID-19, including practicing physical distancing.

Furthermore, by signing below, the Participant or the Participant's Guardian agrees that while attending or participating in the Organization's events or attending at the Organization's facilities, the Participant:

1. Will follow the laws, recommended guidelines, and protocols issued by the Government of the Province in respect of COVID-19, including practicing physical distancing, and will do so to the best of the Participant's ability while participating in the Organization's events or attending at the Organization's facilities;
2. Will follow the guidelines and protocols mandated by the Organization in respect of COVID-19;
3. Will, in the event that the Participant experiences any symptoms of illness such as a fever, cough, difficulty breathing, shortness of breath or malaise, immediately:
 - a. inform a representative of the Organization; and
 - b. depart from the event or facility.

I hereby declare that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

Name of the Participant: _____

Signature of Participant: _____

Date: _____

(If the Participant is under 18, the parent/Guardian must also sign below)

I acknowledge as Parent/Guardian of the Participant that I have read and fully understand and agree to the terms and conditions stated herein on behalf of and myself.

Print Name of Guardian: _____

Signature of Guardian (if Participant is a minor): _____

_____ (check if applicable) I will be in attendance with the Participant on the Premises and Agree to all the terms above with respect to my self as well.

Date: _____