

PERSONAL INFORMATION PRIVACY POLICY

Under the Personal Information Privacy Act (PIPA) the Vegreville Agricultural Society policy concerning personal information privacy is as follows:

By signing this entry form (below, in the Acceptance of Risk area) you are hereby authorizing the Vegreville Agricultural Society to use your personal information to send you future correspondence, as well as use your name and/or photo in our History Book, in promotional pamphlets or advertising and in publishing class results.

If you have concerns about this authorization, please contact the office toll free @ 1-888-611-0161.

ACCEPTANCE OF RISK FORM

This document will affect your legal rights and liabilities. Please read carefully and sign before participating in the Vegreville Country Fair and the Light Horse Show.

I acknowledge that this sport involving horses is a high risk sport, and that I am participating at my own risk and in full knowledge that there are significant risks involved in working with and around horses. I further acknowledge that there is some element of risk that an accident could occur and result in injury or death to the rider and their horse.

In consideration of being allowed to participate, I hereby assume all risk and release/absolve the **VEGREVILLE AGRICULTURAL SOCIETY** and its **employees, directors, volunteers, and officers** from all responsibility, liability, or claims of any nature and kind which I may have arising from my participation in this activity, including bodily injury or death to my horse or myself and damage to property arising from any cause whatsoever. I will be responsible for my equipment and, at no time, hold anyone else responsible for damage or theft of equipment.

I hereby declare that in signing this document that I have read, understand, and agree to the terms and conditions stated herein, and that it is binding upon myself, my executors, and heirs.

Signature of Rider/Handler: _____ Date: _____

If the Rider/Handler is under eighteen years, the parent/guardian must read and sign.

I acknowledge as Parent/Guardian of _____ that I have read, understand, and agree to the terms and conditions state herein and allow my child to participate in this activity.

Signature of
Parent/Guardian: _____ Date: _____

PLEASE NOTE

1. **OPEN SHOW**

You will not be required to stay at the show for 3 days. You may come the day you show and leave the same day. **Exhibitors staying for all 3 days will have first priority for stalls.** Day use stalls will be limited.

2. **Stabling will be assigned by the Horse Show Committee members. Box stalls will not be available for single day use other than for stallions or mares with foals. Exhibitors will not be able to request specific stalls.** Most box stalls will be made available to horses remaining for all 3 days. No stalls will be given for tack use.

3. Exhibitors showing from their trailers will be required to park on the east half of the graveled parking lot north of the horse barns. There will be a \$2.00 show fee per animal.