

# NVCEO Equus Disaster Relief Event (November 12<sup>th</sup> & 13<sup>th</sup>, 2005)

Rider's Number

(NVCEO Use)

Date of Show you are participating in: \_\_\_\_/\_\_\_\_/2005 Team/Barn: \_\_\_\_\_

Rider's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ \*\* Email \*\*: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

If you are competing on more than one horse, please complete a separate registration form for each horse.

Horse's Name: \_\_\_\_\_

**\*\*Required\*\* Copy of Current Coggins (within 12 months) must be attached**

Owner Name: \_\_\_\_\_ Coggins Date: \_\_\_\_\_

Owner Address: \_\_\_\_\_ Accession #: \_\_\_\_\_

Owner City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please write the number of each class you wish to enter on the line below:

Class Numbers: \_\_\_\_\_

Check #: \_\_\_\_\_ or Cash ☐

(NVCEO Use)

Class Entry Fees: \$5.00 per class Number of Classes \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_ Total = \$ \_\_\_\_\_

**Protective headgear is recommended and encouraged, however it is not required for adults.**

**Headgear is mandatory for all riders under 18 years of age.**

## Release and Waiver of Liability

I am aware that horseback riding is an athletic event that poses potentially serious risks of injuries or death to its participants. I understand that my horse or I may be injured or die as a result of my negligence, the negligence of others, or through no fault of myself or anyone else, because of the nature of the activity in which I am going to be engaged. I also understand that horses, even the best trained, are often unpredictable.

With this waiver I accept notice of the provisions of Section 3.1-796.130 through 3.1-796.133 of the Code of Virginia, which state in part: That there are inherent risks in equine activities, including (I) the propensity of an equine to behave in dangerous ways which may result in injury to the participant: (II) the inability to predict an equine's reaction to sound, movements, objects, persons, or animals: and (III) hazards of surface or subsurface conditions. The waiver shall remain valid unless expressly revoked by the participant or parent or guardian of a minor, in writing, with receipt acknowledged by the Northern Virginia Coalition of Equestrian Organizations and its officers.

I understand that I am completely responsible for anything that happens to me and/or my horse while riding on/at the host facility, Cavallo Farm. The hosts, the Northern Virginia Coalition of Equestrian Organizations and its members, directors, officers, and volunteers are in no way responsible for any injuries, damages or losses that may occur. Further, I hereby agree to waive or release (give up) any and all rights that I or my heirs may have to make claim against the host facility, Cavallo Farm and the Northern Virginia Coalition of Equestrian Organizations, or their members, directors, officers and employees, arising from any damages, injury, or death which I might sustain or which might occur to any horse I am riding as a result of my horseback riding.

**I Have Read and Understood the Above Release and Waiver of Liability**

\_\_\_\_\_  
Rider's Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian's Signature (for riders under 18 years of age) Date: \_\_\_\_\_