ENTRY SHEET

The show committee reserves the right to excuse any exhibitor, spectator, or equine from the grounds
All riders 17 and Under must wear an ASTM/SEI approved helmet
All horses must have current NEGATIVE coggins

ENTER ONE (1) CLASS NUMBER PER BOX

Rider's Name	Rider's Age (as of Jan 1st)_	
Horse's Name		
Address		
E-Mail Address		
WAIVER AND RELEATED Participant (on behalf of Participant Herby waives and releases any and THE SPRING GROVE HORSE SHOW INCOME.) Which may arise out of or in connection with this event, an any loss, cause, damage, or expense in connection	and Participant's heirs and assigns) all claims he/she may have against and THE VILLAGE OF SPRING GRO d further agrees to indemnify and hold san	ne harmless for
Signature of Parent (If Participant is a minor)		YES NO
		Rider's Number

Waiver of liability and hold harmless agreement (COVID 19)

In consideration for receiving permission to BE ON THE PREMISES at Spring Grove House Show held at Horse Fair Park, Spring Grove, IL (hereinafter the "Activity or Activities"),I, on behalf of myself and any minor child/children for whom I have the captivity to contract hereby acknowledge and agree to the following:

- 1. I understand the hazards of the Novel Coronavirus ("COVID 19") including its contagious nature, and am familiar with the Center for Disease Control and Prevention ("CDC") guideline regarding COVID-19. I acknowledge and understand that the circumstances regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated and I accept full responsibility for familiarizing myself with the most recent updates, and following the same on the premises.
- 2. Notwithstanding the risks associated with COVID-19, which I already acknowledge, I hereby willingly choose to participate in or observe activities.
- 3. I acknowledge that Spring Grove Horse Show, event staff, volunteers, it's agents, cannot guarantee that I will not become infected with COVID-19 Coronavirus while on the premises or participating or observing the Activities, including the not limited to as the result from the actions, omissions, or negligence of myself and others including, but not limited to Spring Grove Horse Show, event staff, volunteers, it's agents, property managers, other show attendees, participants and their families. I acknowledge and fully assume the risk of illness or death related to COVID-19 arising from being on the premises and observing or participating in the activities and hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE (on behalf of myself and any minor children (for whom I have the capacity to contract) Spring Grove Horse Show, event staff, volunteers, it's agents, and assigns (the "RELEASEES") from any liability related to COVID-19 which might occur as a result of my being on the premises and observing or participating in the activities.
- 4. I shall indemnify, defend and hold harmless the RELEASEES from and against any and all claims, demands, suits, judgments, losses or expenses of any nature whatsoever (including, without limitation, medical costs, attorney's fees, costs, and disbursements, whether of in-house or outside counsel and whether or not an action is brought on appeal or otherwise), arising from or out of , or relating to, directly or indirectly, the infection of COVID-19 or any other released or unrelated illness or injury.
- 5. It is my express intent that this waiver and hold harmless agreement shall bind myself, my heirs, and any assigns, and representatives and shall be deemed as RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above named RELEASEES, I ACKNOWLEDGE THAT THIS WAIVER WAS EXPRESSLY NEGOTIATED AND IS A MATERIAL INDUCEMENT THE PERMISSION GRANTED RELEASEES TO BE ON THE PREMISES AND OBSERVE OR PARTICIPATE IN THE ACTIVITIES.

In SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver and Liability and hold harmless agreement, understand it and sign it voluntarily as my own free act and deed on behalf of myself and my minor children: no oral representations, statement, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full adequate and complete consideration fully intending to be bound by same.

further represent and stipulate that I have no actual knowledge that I or my minor child(ren) currently are infected with COVID 19, nor do we live with anyone who currently is infected with COVID-19. November 19, 19, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10
ignature:
lame

Names of Minor Chid(REN): _____