



WINTON PASTORAL & AGRICULTURAL SHOW SOCIETY INC.

WAIVER

I _____ of _____

Phone _____ Fax _____ Email _____

Hereby Agree to:

1. Indemnify **WINTON PASTORAL & AGRICULTURAL SHOW SOCIETY INC.** against any liability whatsoever for any injury loss or damage sustained by me, my horse or my equipment at the **2019 WINTON SHOW.**
2. Compete and exhibit at the **2019 WINTON SHOW** at my own risk entirely.
3. Forfeit any right to any claim, demand or action against **WINTON PASTORAL & AGRICULTURAL SHOW SOCIETY INC.** or related bodies arising out of the conduct of the **2019 WINTON SHOW.**
4. Declare my horse and equipment are in sound condition.
5. Consent to receiving any medical treatment including ambulance transportation that event organisers think desirable as required during the event.

I have read the contents and fully understand all details of this form. I am 18 years of age or over.

Dated at _____ this _____ day of _____ 2019

Competitor / Exhibitor

Witness

As a parent or guardian of the Competitor/Exhibitor who is under the age of 18 years, I agree to the above for myself and on behalf of my child I indemnify and keep indemnified all people and corporations associated with the conduct of the event on the terms referred to.

Dated at _____ this _____ day of _____ 2019

Parent/Guardian

Witness