



OKOTOKS AGRICULTURAL SOCIETY

Cow Work Weekend Membership ONLY

NO ACCESS TO RIDING / ARENA OTHER THAN CWW

Membership valid October 1, 2022 – September 30, 2023

Please print clearly and fill out completely. No Refunds

Incomplete forms will be returned and membership will not be in effect until all paperwork has been completed.

Family Name: _____ First Name (Main contact): _____

Mailing Address: _____

Town: _____ Postal Code: _____

Phone (H): _____ Phone (C): _____

The OAS uses email as the most effective way of communicating with our members. We do not share our email list with any other organization. Yes – contact using email address below No

Email: _____

Individual Members (a waiver must be signed for ALL members listed – Youth Waiver is 2 pages)

Last Name	First Name	Youth Y/N?

Membership \$45 (Membership fees can be applied to a current years membership at any time)

TOTAL PAID: _____

Emergency Contact Information

Name: _____ Relationship: _____

Phone (H): _____ Phone (C): _____

WAIVER FOR ADULT PARTICIPANTS – Okotoks Agricultural Society

ACKNOWLEDGEMENT AND ASSUMPTION OF RISK

I UNDERSTAND AND AGREE that there is potential risk for injury involved in the training and participation of any physical activity. I further understand and agree that participating in any events is a potentially dangerous activity. Bumps, bruises, scrapes, scratches and soreness are commonplace, and most participants will encounter this sort of minor injury from time to time. More serious injuries are possible, including sprains, strains, twists, cramps, and injuries of similar magnitude. The possibility of more serious injury exists, including fractured bones, broken bones, torn ligaments, though most participants do not encounter such serious injuries. There remains, despite safety precautions, the remote possibility of crippling or death. **I FREELY ACCEPT AND FULLY ACKNOWLEDGE** all such risks, dangers and hazards, resulting from my participation in any event hosted or sponsored by the Okotoks Agricultural Society

I am also aware that I should discuss my participation in this activity with my physician to determine the effect on my current health. It is my right and responsibility as a participant to immediately remove myself from participation in the program and notify the nearest official, if at any time I sense any unusual hazard or unsafe condition or if I feel that I am physically, emotionally, or mentally unfit for continued participation in the program.

I have read and understand the above statement of risk. I assume responsibility for my own safety, and I understand and accept the risks involved with my participation.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIM that I have or may in future have against Okotoks Agricultural Society, its coaches, officials, members, agents, directors, officers, employees and representatives, and other participants (all of whom are hereinafter collectively referred to as “Releasees”.

I HAVE READ, understood and agree with the statements in the **ACKNOWLEDGEMENT AND ASSUMPTION OF RISK** portion of this document, and by assuming and acknowledging this risk, I completely absolve all **RELEASEES** from any and all liability for loss, damage, injury or expense that I may suffer, that a third party may suffer, or that my next of kin may suffer as a result of my participation in any of the activities and/or programs offered by the Releasees, **DUE TO ANY CAUSE WHATSOEVER**. I acknowledge my responsibility to ensure adequate medical personal health, dental and accident insurance coverage, as well as protection of my personal possessions.

I, the undersigned, give permission to the Okotoks Agricultural Society, and/or parties designated by the Okotoks Agricultural Society to photograph/video me and use such photograph(s)/video(s) in all forms of media, for any and all promotional purposes including social media, advertising, display, audiovisual, exhibition or editorial use.

I further consent to the use of my name in connection with the photograph(s)/video(s) if needed by the Okotoks Agricultural Society and/or parties designated by the Okotoks Agricultural Society.

I understand and agree that I will not receive any payment for my time or expenses or any royalty for the publication of the photograph(s)/video(s) or the use of my name and I hereby release the Okotoks Agricultural Society and/or any parties designated by the Okotoks Agricultural Society from any such claims.

For the comfort and safety of our patrons, entrance to the Okotoks Agricultural Society assumes compliance with the Terms of Entry as outlined on Okotoksag.com

IN ENTERING INTO THIS AGREEMENT I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this agreement.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS OR ASSIGNS MAY HAVE AGAINST THE RELEASEE.

Signed this _____ day of _____, 20____

Signature of Participant:

Printed Name of Participant:

Witness to Signatures

Printed Name of Witness