



Super Early Bird

Forms received by September 25th

Membership and 2 tickets to the Dinner/Barn Dance on Sept 30th

Sponsored by Design Printing



All Forms Received by September 30th

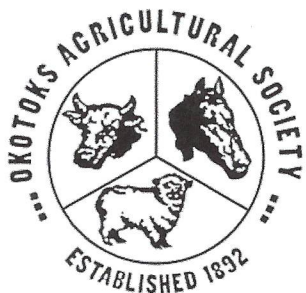
- 1) Membership/Riding Pass –Train's Landscaping
- 2) Weathertech floor mats – custom to your vehicle (\$300value) – Ziebart
- 3) \$50 Tim Hortons Gift Card – Design Printing
- 4) \$25 Tim Hortons Gift Card – Design Printing

Forms online at Okotoksag.com





2023-2024 Membership Package





Train's is a full service, year-round landscape company, committed to fulfilling all your Property Maintenance needs.

The team of experts have many years of experience in the industry, which helps us develop and deliver custom made programs and solutions for you and your property.

They now service Calgary, Airdrie, Brooks, Okotoks, and the surrounding areas. Their expansion and stellar reputation for the past 20+ years is due in part to our exceptional quality and timely service.

The maintenance teams at Train's offer a complete a full property analysis during each visit and resolve any landscape related issues, to ensure your property is at its safest, healthiest, and looking its best.

Trains has the Certificate of Recognition (COR) with the Alberta Construction Safety Association, and are accredited with Contractor Check and the Better Business Bureau and we are members of the CPC Irrigation Association.

Trains takes pride in providing customer satisfaction that is second to none and are always just a phone call or e-mail away.

Trains Lawn Care and Landscaping – a proud major sponsor of the Okotoks Agricultural Society and the Agriplex. We thank you for your support.

Trainslawncare.ca

403-590-2002



OKOTOKS AGRICULTURAL SOCIETY MEMBERSHIP FORM

Membership valid October 1, 2023 – September 30, 2024

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 please check

Family ¹	\$164	<input type="checkbox"/>
Single (Over 18 yrs)	\$142	<input type="checkbox"/>
Senior (Over 60 years)	\$120	<input type="checkbox"/>
Student ²	\$120	<input type="checkbox"/>

Optional Riding Pass (2 horses per person) please check

Family	\$500	<input type="checkbox"/>
Single	\$360	<input type="checkbox"/>
Senior	\$320	<input type="checkbox"/>
Student	\$320	<input type="checkbox"/>
Trainer (4 Horses)	\$800	<input type="checkbox"/>
Trainer Add Horses	\$75	<input type="checkbox"/>

TOTAL PAID: _____

***Riding Passes are optional. They allow unlimited riding during members open riding time. They cannot be purchased without a membership. Drop In fee is \$25**

Emergency Contact Information

Name: _____ Relationship: _____

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

Completed forms may be emailed to: okotoksagsociety@gmail.com and can be

-dropped off in the lockbox – south end of the indoor arena E-TRANSFERS are accepted and may be sent to okotoksagsociety@gmail.com

Credit cards – okotoksag.com – membership area of the site

¹ Family must reside in same household – includes children under 18 or those in post-secondary under 25 years

² 18 years of age or younger or those in post-secondary to 25 years old

Members Code of Conduct

We, the Members of the Okotoks Agricultural Society accept our individual and collective duty to participate unselfishly.

We commit to:

Serve the Agricultural Society by making decisions that best suit the interests of the Agricultural Society and the community it serves.

Prepare and participate in order to add value to the organization at all general meetings and functions.

Honour each other during and outside of meetings, appreciating the value and diversity that each other's experience and perspective bring to our organization.

Speak positively of the Agricultural Society so that our Board, staff, and the public receive a clear, consistent, honest message that honours our organization.

Respect of any information learned during our participation as members.

Avoids conflict of interest by informing the Board whenever there is perceived conflict and abstaining from motions, discussions or decision-making.

Uphold commitments by understanding the Agricultural Societies bylaws, being informed and supporting the plans set by the Board, ensuring the objectives of the Agricultural Society are being accomplished.

Seek excellence by investing in personal and organizational development and growth.

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

ADULT WAIVER FOR MINOR PARTICIPANT – Okotoks Agricultural Society
Two pages

**RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS
AND INDEMNITY AGREEMENT**

**BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE
RIGHT TO SUE.**

PLEASE READ CAREFULLY!

In consideration for allowing my minor child/ward to participate in all related events and activities of Okotoks Agricultural Society I hereby warrant and agree:

1. I am the parent/guardian having full legal responsibility for decisions regarding my minor child/ward, *namely* ; and
2. I am familiar with and accept, on behalf of myself and my minor child/ward that there is the risk of serious injury and death in participation in any events/activities and in competitive activity in particular; and
3. I have satisfied myself and believe that my minor child/ward is physically, emotionally and mentally able to participate in this program, and that his/her equipment is mechanically fit for his/her use in this program; and
4. I understand, and will instruct my minor child/ward, that all applicable rules for participation must be followed and that at all times the sole responsibility for personal safety remains with my minor child/ward; and
5. I will immediately remove my minor child/ward from participation, and notify the nearest official, if at any time I sense or observe any unusual hazard or unsafe condition or if I feel that my minor child/ward has experienced any deterioration in his/her physical, emotional or mental fitness for continued participation in the program.
6. I authorize Okotoks Agricultural Society to consent to emergency medical treatment in accordance with the best interests of my minor child/ward, should I not be present at the relevant time to grant consent myself.

I UNDERSTAND AND AGREE, ON BEHALF OF MY MINOR CHILD/WARD, HIS/HER HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, MYSELF, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN THAT MY EXECUTION OF THIS DOCUMENT CONSTITUTES:

1. AN UNQUALIFIED ASSUMPTION OF ALL RISKS associated with participation in this program by my minor child/ward even if arising from negligence or gross negligence, including any compounding or aggravation of injuries caused by negligent first aid operations or procedures, of the program organizer, the program venue and any persons associated therewith or participating therein; and
2. A FULL AND FINAL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS that I have or may in the future have against Okotoks Agricultural Society and its directors, officers, employees, guides and representatives, advertisers, other participants, sponsors (all of whom are collectively referred to as "the Releasees") from any and all liability for any loss, damage, injury or expense that my minor child/ward may suffer, or that his/her next of kin may suffer as a result of his/her use of or presence at, the facilities, due to any cause whatsoever, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE RELEVANT OCCUPIERS LIABILITY ACT OR ANY OTHER RELEVANT STATUTES, on the part of the Releasees.

3. AN AGREEMENT NOT TO SUE THE RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation of my minor child/ward in the program; and
4. AN AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASEES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the Releasees or otherwise.
5. 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.
6. 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
7. AN ACKNOWLEDGMENT that I HAVE READ THIS DOCUMENT THOROUGHLY..
I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN SUBSTANTIAL LEGAL RIGHTS WHICH MY MINOR CHILD/WARD, HIS/HER HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS AND I MAY HAVE AGAINST THE RELEASEES.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

Signature of Parent/Guardian

Printed name of Parent/Guardian

Signature of Witness to Signature of
Parent/Guardian

Printed Name of Witness

Date

Age of Minor Child/Ward