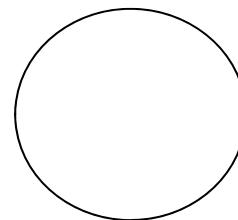


Island Arabian Sport Horse AVS

June 15th. 2025
EBLES, 720 Beaver Lake Rd, Victoria, BC
HCBC Permit and AHA Recognized Show – Region 17 Qualifier



Horse Information

NAME	REGISTRY	REGISTRATION #	DATE OF BIRTH	SEX
SIRE		DAM		
		X		

Owner Information

NAME	AHA #	HCBC #
ADDRESS	CITY	POSTAL CODE
EMAIL ADDRESS		PHONE

Amateur Owner Rider

NAME	RELATION TO REGISTERED OWNER
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Trainer

NAME	HCBC#
	AHA #

The Trainer is the person on the show grounds who is accepting responsibility for the entry.

All entries **MUST** be accompanied by copies of the horse's registration papers and the AHA Competition Card and HCBC Membership Card for each of the owner, the rider/handler/driver and trainer.

Junior Riders (Parent/Guardian must sign back of Entry Form)

NAME	DATE OF BIRTH
NAME	DATE OF BIRTH

Entry Information

	CLASS NUMBERS						FEES
RIDER/HANDLER	HCBC #						
	AHA #						
RIDER/HANDLER	HCBC #						
	AHA #						
RIDER/HANDLER	HCBC #						
	AHA #						
RIDER/HANDLER	HCBC #	TBA CLASS NAME					
	AHA #						

Ensure all required signatures are on next pages

I hereby certify that every horse, rider and/or driver is eligible as entered and agree for myself and my representatives to be bound by the Constitution and rules of Arabian Horse Association at this competition. It is hereby recognized that all equestrian sports involve inherent risk and that no helmet or protective equipment can protect against all foreseeable injury. I hereby accept this risk and hold harmless AHA, the competition, their officials, organizers, agents, employees and their representatives. The person responsible (PR) agrees to the release of any information on the entry form to AHA.

Signed: _____
(owner or agent)

Total Class Fees	
Office Charge	10.00
Ring Fee	5.00
Late Fee (\$25)	
AHA Single Event Fee (\$40+\$10.00)	50.00
AHA 9-90 Fee (\$5.00 + \$2.00)	7.00
AHA Show Fee (\$7.00 + \$2.00)	9.00
TOTAL FEES	

Entries close June 10th 2025

Mail your completed Entry Form to:

VIAHA,
1780 Akenhead Rd
Nanaimo BC V9X 1V4

For more information Phone: 250-722-2150

Email: gmcdonald1780@gmail.com

Payment methods

1. by Cheque
*Make cheques payable to VIAHA, or
Vancouver Island Arabian Horse Association*
2. by e-transfer
Send to viaha.etransfer@gmail.com

Ensure all required signatures are on next pages

Please Note: All incomplete entries WILL NOT be processed. It is the responsibility of the exhibitor that all information is complete!!

Please read and complete release

AHA ENTRY AGREEMENT

I have read the rules concerning competitions as printed in the Arabian Horse Association® (AHA®) Handbook and the Value Show Rules and agree to be bound by and subject to those Rules **and understand all decisions made by the judge are deemed final and can not be protested.**

AHA ASSUMPTION OF RISK, RELEASE AND INDEMNIFICATION

This document waives very important legal rights. Read it carefully before signing.

In consideration for AHA permitting me to participate in this Competition, and by signing the entry blank, I agree as follows:

I AGREE that I choose to participate voluntarily in this Competition, as a rider, driver, handler, leasee, owner, agent, coach, trainer, junior exhibitor, or as a parent or guardian of a junior exhibitor. **I AM FULLY AWARE AND ACKNOWLEDGE THAT HORSE SPORTS AND PARTICIPATION IN THIS COMPETITION INVOLVE SERIOUS RISK OF HARM INCLUDING, BUT NOT LIMITED TO, RISKS OF ACCIDENT, SERIOUS BODILY INJURY, INCLUDING DEATH, BROKEN BONES, HEAD INJURIES, TRAUMA, PAIN AND SUFFERING, AND PROPERTY DAMAGE. I ASSUME ALL RISKS OF HARM TO ME, MY HORSE OR MY PROPERTY.**

I AGREE as a Horse Show Participant (or Parent/Guardian of Participant if a minor) to waive all claims which may otherwise arise from, including but not limited to infectious bacteria, viruses, fungi/mold, parasites or other agents which may be present at the Horse Show (and most other outdoor locations) and can cause infection in humans, as well as in animals.

I AGREE for myself, my heirs, executors, administrators, successors and assigns **to release** AHA, the Competition, the facilities leased by the Competition and the owner(s) of the facilities, and all of their respective officers, officials, directors, employees, agents, personnel, volunteers, affiliated organizations and insurers (collectively, the "Released Parties") from any and **all claims for damage, loss, or injury to myself, other persons, horses or other property belonging to me to the fullest extent** permitted by law that arises out of or relates in any way to the Competition and my participation in the Competition **INCLUDING, BUT NOT LIMITED TO, DAMAGES, LOSS, OR INJURY RESULTING FROM ANY ACTS, FAILURE TO ACT, NEGLIGENCE OR NEGLECT OF OTHER ENTRANTS, THE RELEASED PARTIES, THEIR CONTRACTORS OR INVITEES**, as well as for theft, vandalism, fire, other casualty damage, or damage arising out of any defects in the premises.

I AGREE to indemnify and hold harmless (that is pay all losses, damages, attorneys fees and costs of) the Released Parties from and against any and all claims, demands, penalties, actions, losses, costs, damages, injuries, liabilities and obligations (including attorneys fees) of whatsoever kind and nature, which may be asserted against or incurred by any of them as a result of (1) my participation in the Competition or (2) any act, failure to act, or neglect (a) by me, my agents, employees, riders, handlers, trainers, coaches, drivers, contractors or invitees, or (b) by any animal owned or exhibited by me or in my custody or control.

I AGREE to accept AS FINAL any decision of AHA, the Show Commission or Show Officials concerning my qualification or the qualification of my horse to enter the Competition or any results of the Competition, except to the extent that the Rules of AHA, the Competition, Equestrian Canada or U.S. Equestrian Federation permit a protest or hearing of such decisions. Should a hearing be requested, **I agree to accept AS FINAL** the decision of the particular hearing body. **I agree to release, hold harmless and not to sue** AHA, the Competition Sponsor, their officers, directors, employees, volunteers or members concerning any decision of AHA, the Competition, its Show Commission, Show Officials or any hearing body that relates to my qualifications or my horse(s)' qualifications to enter the Competition or any results of the Competition.

I AGREE that AHA has the sole right to control, sell, supervise or give away (or assign to others the right to do so) the exclusive rights to broadcast, televise, reproduce, transmit and disseminate all or part of this event, and I agree that AHA may use or assign, in any way AHA sees fit, photographs, films, videos, audios, cablecasts, or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition or AHA. Those likenesses shall not be used to advertise a product and they may not be used in such a way which implies endorsement of any company, product, product category or service. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation.

I AGREE and represent that I am qualified and eligible to enter and/or participate in the Competition and every horse I am entering is qualified and eligible as entered .

I FUTHER AGREE that by participating in an Amateur class that I am in compliance with the USEF/EC Amateur rule.

By signing below as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions, and further agree to assume all of the obligations of this AHA Assumption of Risk, Release and Indemnification personally and on behalf of the child.

This AHA Assumption of Risk, Release and Indemnification is governed by the Laws of the State of Colorado and is intended to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue (place) for any legal action against AHA, its officers, directors, employees, volunteers or agents shall be in the local district courts or the federal court of the State of Colorado. If any part of this agreement is determined to be unenforceable, all other parts shall remain in effect.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

Owner -** Mandatory	No Junior Signatures	Signature X
Trainer or Custodian of horse @ show - ** Mandatory	No Junior Signatures Adult Owner must sign if no trainer	Signature X
Rider 1 - ** Mandatory	No Junior Signatures	Signature X
Rider 2 - ** Mandatory	No Junior Signatures	Signature X
Rider 3 -** Mandatory	No Junior Signatures	Signature X
Rider 4 -** Mandatory	No Junior Signatures	Signature X

RELEASE AND INDEMNIFICATION

**READ THIS RELEASE AND INDEMNITY CAREFULLY AS IT MAY AFFECT YOUR
LEGAL RIGHTS**

The undersigned acknowledges that there are dangers and risks of injury inherent in equestrian activities, including but not limited to the risk of death, bodily injury, and or property damage.

The undersigned, in consideration of the participant's right to participate in events and otherwise to use the Equestrian Centre at Elk/Beaver Lake Regional Park, assumes all risks and hazards incidental to such participation and use and agrees to release, absolve, save harmless and keep indemnified the Elk/Beaver Lake Equestrian Society and the Capital Regional District and its officers, employees, officials, agents, servants, volunteers and representatives from and against all claims, action, costs, expenses and demands in respect to death, injury, loss or damage to the person or property of the participant, howsoever caused, arising out of or in connection with the participant's taking part in this program. It is understood that this Agreement is to be binding on myself, my heirs, executors and assigns.

SIGNED this _____ day of _____, 20____

Name of Participant (please print)

(If Participant is a minor, the participant's parent or guardian shall execute this Agreement on the participant's behalf)

Parent or Guardian's Name (please print) & Signature

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY (AR-0103)

For Participants Over the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!
Every Person Must Read and Understand this Waiver Before Participating in Equine Activities

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me (the Participant) with and for the benefit of: **Capital Regional District & Elk/Beaver Lake Equestrian Society**, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips and riding instructions provided by the "Host" to the Participant.

Initial Each Item below after Reading and Understanding each item:

- _____ 1. I am aware that there are inherent dangers, hazards and risks (collectively "Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to:
 - (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects;
 - (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects;
 - (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
- _____ 2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of personal injury, death, property damage or loss resulting from my participation in "Equine Activities".
- _____ 3. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to me in my participation in "Equine Activities".
- _____ 4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns (collectively my "Legal Representatives") agree:
 - (a) to waive all claims that I have or may have in the future against the "Host";
 - (b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss resulting from my participation in the equine activity due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and
 - (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with my participation in "Equine Activities".
- _____ 5. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".
- _____ 6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself and the "Host", and it is binding on myself and my "Legal Representatives".
- _____ 7. I confirm that I have reached the age of majority in the province in which I am participating in "Equine Activities".

Please Print Clearly

Participant Name _____ Date of Birth _____

Address _____ City _____ Province _____ Postal _____

Phone # (_____) _____ Email: _____

_____ Signed this _____ day of _____, 20____

(Signature of Participant)

(Print Name of "Host" Witness to Signing and Initialing)

_____ Signed this _____ day of _____, 20____

(Signature of "Host" Witness)

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY (AR-0103)

For Participants **Under the Age of Majority** in the Province or Territory in which the Equine Activities are Provided by the Host.

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

The Parent/Guardian Must Read and Understand this Waiver Prior to Infant Participating in Equine Activities:

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me on behalf of the Infant Participant named below with and for the benefit of **Capital Regional District & Elk/Beaver Lake Equestrian Society**, its directors, officers, employees, volunteers, business operators, agents, and site property owners or lessees (the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips or riding instruction provided by the "Host" to the Infant Participant.

Initial Each Item below after Reading and Understanding each item:

- _____ 1. I am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the Infant Participant in my capacity as Parent/Guardian and with the intent that his waiver be binding on myself and the Infant Participant for all legal purposes.
- _____ 2. I am aware that there are inherent dangers, hazards and risks ("Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to:
 - (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects;
 - (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects; and
 - (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
- _____ 3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities".
- _____ 4. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".
- _____ 5. In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree:
 - (a) to waive all claims that the Infant Participant has or may have in the future against the "Host";
 - (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and
 - (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Infant's participation in "Equine Activities".
- _____ 6. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".
- _____ 7. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between the "Host", myself as Parent/Guardian, and the Infant Participant, and it is binding on myself, the Infant Participant and our "Legal Representatives".

Please Print Clearly

Infant Participant's Name _____

Date of Birth _____

Address _____ City _____ Province _____ PC _____

Parent/Guardian's Name _____

Date of Birth _____

Address _____ City _____ Province _____ PC _____

Phone # (_____) _____ Email: _____

Signed this _____ day of _____, 20____

(Signature of Parent/Guardian of Infant Participant)

(Print Name & Signature of "Host" Witness to Signing and Initialing)