

TDSC 2020 Jackpot Entry Form

Rider Name: _____ DOB: _____ Horse's Name: _____

Mailing Address: _____ Phone: _____

Notes: 1. Jackpot will be the random event for the day.

Of Jackpot events 1 x \$10.00 = \$10.00

The undersigned does hereby release and discharge Trail Dust Saddle Club, A Oregon Nonprofit corporation, it's members, officers, directors, agents, volunteers, and employees, as well as Jackson County Oregon, a political subdivision of the State of Oregon, it's employees and agents and any other persons participation in the production of events and activities of the Trail Dust Saddle Club from any and all claims, demands, causes of action or other liability which arise from on or on account of any loss or damage of any kind, known or unknown, personal, physical, property, or monetary, which may arise from any activities or events of Trail Dust Saddle Club at any time now or in the future. I know and am aware of the unpredictable nature and dangerous characteristics of horses, ponies, and livestock. I understand that I will be engaging in inherently dangerous activities, which may result in injury to property or persons and/ or death. I hereby agree to assume all risks and liability associated with these activities. I agree to indemnify and hold harmless Trail Dust Saddle Club and Jackson County Oregon, their officers, members, agents, directors, guests, volunteers, and employees. I acknowledge that my participation in these events will be subject to the rules and regulations of the Trail Dust Saddle Club and rules and regulations set forth for the particular event or activity. I also agree on behalf of myself, my heirs, personal representatives, successors and assigns. If a child under the age of 18 is participating in these activities then the undersigned acknowledges that they are the custodial parent or legal guardians of said child and are authorized to sign on their behalf.

Signature: _____ Date: _____

Signed Waiver of Liability

Officers Initials _____ Check # _____ Jackpot Amt. \$ _____

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