



830 Hagey Rd, Creston, BC  
250-428-1708  
info.cmsabc@gmail.com

## 2024 MEMBERSHIP FORM

NAME: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: Street / PO Box: \_\_\_\_\_

Town/City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code \_\_\_\_\_ Home

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ ph.: \_\_\_\_\_

Possession & Acquisition License Restricted #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Horse Council of BC Membership #: \_\_\_\_\_ (mandatory for CMSABC riding members)

**Horse Council Membership not required if member WILL NOT RIDE**

<b>2024 Membership Fees:</b>	<b>Individual Adult..... \$ 50.00</b>
Wrangler/ Youth (under 18) ..... \$ 25.00	<b>Associate..... \$ 25.00</b>
<b>*** May be upgraded to Full Membership at any time during the year by paying balance of \$25***</b>	

**Payment Method:**(circle) Cheque/money order/cash/e-transfer made payable to:[info.cmsabc@gmail.com](mailto:info.cmsabc@gmail.com) or sent to: **Cowboy Mounted Shooters Association of BC**  
830 Hagey Road  
Creston, BC V0B 1G2

**Mandatory! Read Below and Sign re: Confidentiality:** \_\_\_\_\_  
(signature)

**BC Personal Information Protection Act {PIPA}.** The CMSABC requires collection of personal information (as appears on the membership application) for the purpose of providing all privileges and services to their membership. This information will only be used or disclosed as is reasonably expected, necessary or requested by our membership or the Board of Directors. Members names and photos/videos may be used on the CMSABC website, social media or promotional material. I hereby consent to the collection, use or disclosure of all personal information contained on the membership form and the CMSABC will only use or disclose such information as it reasonably expected, necessary or requested. This may include, from time to time, a publication of a CMSABC membership and telephone directory for distribution only to membership of the CMSABC. **By submitting this form you are agreeing to the terms set above.**

Office Use only -	
Date Received: _____	Payment Method: _____
CMSABC #: _____	Received by: _____

**Mandatory! Read and Sign Second Page re: Liability and Confidentiality**



830 Hagey Rd, Creston, BC  
250-428-1708  
info.cmsabc@gmail.com

## 2024 MEMBERSHIP FORM

### 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: **Cowboy Mounted Shooters Association of BC**, 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, competitions, tournaments organized and /or operated by the "Host", riding instruction, coaching and training 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.
  - (d) the potential of natural or man-made hazards being present that can cause me harm, including communicable disease.
- \_\_\_\_\_ 2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, sickness, disease, medical payments, death, property damage or loss resulting from my participation in "EquineActivities".
- \_\_\_\_\_ 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 "EquineActivities".
- \_\_\_\_\_ 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 "EquineActivities".

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Tel#: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_ Signed this \_\_\_\_\_ day of, 20\_\_\_\_\_

Name of "Host" (Witness): \_\_\_\_\_

Signature of "Host" (Witness): \_\_\_\_\_ Signed this \_\_\_\_\_ day of, 20\_\_\_\_\_