

**Agreement For Participation in SCQHYA/AQHHA Activities**

For the purposes of this Agreement, the terms "SCQHYA/AQHHA Activities" includes, but is not limited to, actual South Carolina Quarter Horse Youth Association and/or American Quarter Horse Youth Association events and programs, travel to and from SCQHYA/AQHHA events and programs and any activities (scheduled, unscheduled, supervised and/or unsupervised) that occur between the first day of scheduled events or programs and the last day of scheduled events and programs.

**In consideration** of being permitted to participate in SCQHYA/AQHHA Activities,  
I \_\_\_\_\_ (print name of SCQHYA/AQHHA Activities participant)  
("Participant"), for myself, personal representatives, assigns, heirs and next of kin:

1. **Acknowledge**, agree and represent that I understand the nature of SCQHYA/AQHHA Activities and that I am qualified, in good health, and proper physical condition to participate in such Activities;
2. **Fully understand that:** (a) SCQHYA/AQHHA Activities involve risks and dangers of serious bodily injury, including, but not limited to, "inherent risks of equine activities", permanent disability, paralysis, and death (collectively "Risks"); (b) these Risks and dangers may be caused by my own action or inaction of others participating in the Activities, the condition in which the Activities take place, or The Negligence of the "Releases" Named Below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; (d) "inherent risk of equine activities" means dangers or conditions that are an integral part of equine activities, including, but not limited to any of the following; (i) the propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine; (ii) the unpredictability of an equine's reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals; (iii) hazards, including, but not limited to surface or subsurface conditions; (iv) a collision with another equine, another animal, a person, or an object; and (v) the potential of an equine activity participant to act in a negligent manner that may contribute to injury, death or loss to the persons of the participant or to other persons, including but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant; **and I fully accept and assume all such risks and all responsibilities for losses costs and damages I incur as a result of my participation in the activities;**
3. **Warrant** and represent that, if the Activities involve horses, I am adequately qualified and experienced to both (a) safely handle and ride a horse in a manner to protect myself and other participants, and (b) participate with groups of riders and horses, such as to take adequate defensive action to avoid injury from third party riders and horses. Furthermore, I understand that it is my responsibility to ascertain the adequacy of my training and experience, and to conduct myself in a manner such as to make the Activities safe and enjoyable for all participants and myself.
4. **Hereby release, discharge, and covenant not to sue SCQHA/SCQHHA/AQHA/AQHHA or their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owner and lessors of premises on which the activities take place, (each, considered one of the "releasees" herein) from all liability, claims, demands, losses, or damages whenever or however arising as to injury, death, and/or property damage occurring as a result of my participation in the activities or caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise.**
5. **Agree** to indemnify, hold harmless and defend "releasees" at my expense, from any and all liability, whenever or however arising from all third party claims, demands, causes of action, suits, judgments, liabilities, costs and expenses of any nature arising out of (i) my negligent act(s) or omissions during or related in any way to the Activities; and/or  
(ii) my willful act(s) or omission(s) during or related in any way to the Activities; and/or (iii) any misinformation or misrepresentation made by me in the Agreement. I agree to pay any of "releasees" costs, expenses and; reasonable



attorney fees incurred, arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.

6. **Understand** that should I not abide by the established rules of conduct, I will be returned home, and I agree to pay for the necessary transportation expenses for the accompanying chaperone and myself. Specifically, insubordination, possession and or consumption of alcoholic beverages, possession and/or use of harmful non-prescribed drugs or substances, destruction of property, cheating or misrepresentation in a competition event, failure to participate in program as scheduled, fighting, disruptive behavior, violation of SCQHA/ SCQHYA and/or AQHYA rules and regulations, violation of established curfews and any other policies established by the supervisor designed to assure the safety and wellbeing of the group and individuals will be deemed as just cause for disciplinary action; and
7. **Authorize** those in charge of the delegation to make medical arrangements for the care of me as deemed necessary. I further authorize any licensed medical person/facility to treat me. I agree to assume full financial responsibility for any medical services provided.

List any **special health factors** which the Participant has, such as asthma, heart condition, epilepsy, diabetes, allergic reaction to medication, etc. (attach additional sheet if necessary):

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List any **prescribed medication** that the participant will be taking while attending, and/or participating in the Activities (attach additional sheet if necessary);

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*I have read this agreement, fully understand it's terms, understand that I have given up substantial rights by signing it and have signed it freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.*

Participant's Signature: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell: \_\_\_\_\_ Date: \_\_\_\_\_



### Parent/Guardian Consent, Authorization, Release and Indemnity

And I, the participant's parent and/or legal guardian, have read this Agreement and fully understand the nature of the Activities, the associated Risks of the Activities and the Participants experience and capabilities and represent that the Participant is qualified, in good health and in proper physical condition to participate in such Activities. **I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of the participant's participation in the Activities.**

**I hereby release, discharge, and covenant not to sue the "releasees" from all liability, claims, demands, losses, or damages whenever or however arising as to injury, death, and/or property damage occurring as a result of participant's participation in the Activities or caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise.** I agree to indemnify, hold harmless and defend "releasees" at my expense, from any and all liability, whenever or however arising, from all third party claims, demands, causes of action, suits, judgments, liabilities, costs and expenses of any nature arising out of (i) Participant's negligent act(s) or omission(s) during or related in any way to the Activities; and or (ii) Participant's willful act(s) or omission(s) during or related in any way to the Activities; and for (iii) any misinformation or misrepresentations made by the Participant or me in this Agreement. I agree to pay any of "releasees" costs, expenses, and reasonable attorney fees incurred arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.

Should the Participant not abide by the established rules of conduct, I understand that the Participant will be returned home, and I agree to pay the necessary transportation expenses for the Participant and accompanying chaperone. I authorize those in charge of the delegation to make medical arrangements for the care of the Participant as deemed necessary. I further authorize any licensed medical person/facility to treat the Participant. I agree to assume full financial responsibility for any medical services provided.

**I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed if freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.**

Printed Name of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Cell #: \_\_\_\_\_

\_\_\_\_\_ Alt Phone #: \_\_\_\_\_

Name and Cell # of Person Who would Know Whereabouts of Parent/Guardian:

\_\_\_\_\_

Name, Address and Phone of Family Physician: \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Signature Required, regardless of Participants Age:

\_\_\_\_\_ Date: \_\_\_\_\_



**PARENTAL/GUARDIAN CONSENT, AUTHORIZATION, RELEASE & INDEMNITY**

And I, the Participant's parent and/or legal guardian, have read this Agreement and fully understand its terms. I understand the nature of the Activities, the associated Risks of the Activities and the Participant's experience and capabilities and represent that the Participant is qualified, in good health and in proper physical condition to participate in such Activities. **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES INCURRED AS A RESULT OF THE PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES.**

**I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE "RELEASEES" FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES WHENEVER OR HOWEVER ARISING AS TO INJURY, DEATH AND/OR PROPERTY DAMAGE OCCURRING AS A RESULT OF PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES OR CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE.** I agree to indemnify, hold harmless and defend "RELEASEES" at my expense, from any and all liability, whenever or however arising, from all third party claims, demands, causes of action, suits, judgments, liabilities, costs and expenses of any nature arising out of (i) Participant's negligent act(s) or omissions during or related in any way to the Activities; and/or (ii) Participant's willful act(s) or omission(s) during or related in any way to the Activities; and/or (iii) any misinformation or misrepresentations made by the Participant or me in this Agreement. I agree to pay any of "RELEASEES'" costs, expenses and reasonable attorney fees incurred, arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.

Should the Participant not abide by the established rules of conduct and I am not in attendance at the World Show, I understand that the Participant will be returned home, and I agree to pay for the necessary transportation expenses for the Participant and the accompanying chaperone. I authorize those in charge of the delegation to make medical arrangements for the care of the Participant as deemed necessary. I further authorize any licensed medical person/facility to treat the Participant. I agree to assume full financial responsibility for any medical services provided.

**I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.** By submitting this document to AQHA, I hereby agree to be bound by all the terms and conditions of *AQHA's Official Handbook of Rules and Regulations*.

**ALL INFORMATION BELOW IS REQUIRED**

Parent/Guardian Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Trainer or person having care, custody and control over the horse: \_\_\_\_\_

Cell phone number of trainer or person in care of horse: \_\_\_\_\_

**\*If Legal Guardian, court-issued documentation must accompany entry if not already on file with AQHA—NO EXCEPTIONS.**

***PLEASE TURN THIS PAGE OVER***

***AND HAVE THE YOUTH EXHIBITOR COMPLETE.***

***We cannot accept without both the participant (exhibitor)***

***and parent/guardian signatures.***



**AQHYA WORLD SHOW ASSUMPTION OF RISK, RELEASE OF LIABILITY AND INDEMNITY AGREEMENT  
(PARTICIPANT AND PARENT/GUARDIAN BOTH MUST SIGN)**

As a condition of participation in the AQHYA World Championship Show ("World Show"), and in consideration of being allowed to participate, the Participant does hereby:

1. **ACKNOWLEDGE** receipt of AQHYA World Championship Show Rules & Regulations Handbook and the AQHA Official Handbook of Rules & Regulations (collectively "AQHA Rules & Regulations").
2. **CERTIFY** that I have read, understand and agree to obey (a) all AQHA Rules & Regulations (including, but not limited to, Rule SHW235 (Youth Eligibility); Rules VIO100, VIO200, VIO300 & VIO330 (Violations); and Rule GEN111 (Likeness Reproduction)). I further agree to obey the directions of the AQHA representatives conducting the World Show.
3. **ACKNOWLEDGE**, agree, and represent that Participant understands the nature of the participation and attendance activities associated with the Youth World Show ("Activities") and that the Participant is qualified, in good health, and in proper physical condition to participate in such Activities;
4. **FULLY UNDERSTAND THAT THE ACTIVITIES INCLUDE, BUT ARE NOT LIMITED TO, "INHERENT RISKS OF EQUINE ACTIVITIES" THAT MAY RESULT IN PROPERTY DAMAGE AND BODILY INJURY, INCLUDING, BUT NOT LIMITED TO, PERMANENT DISABILITY, PARALYSIS, AND DEATH (collectively "RISKS");** that such RISKS may be caused by Participant's own action or inaction, the action or inaction of others participating in the Activities, the condition of the premises at which the Activities take place, and/or **THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW;**
5. **UNDERSTAND AND AGREE** that "Inherent risk of equine activities" means dangers or conditions that are an integral part of equine activities, including, but not limited to, any of the following: (a) the propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine; (b) the unpredictability of an equine's reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals; (c) hazards, including, but not limited to, surface or subsurface conditions; (d) a collision with another equine, another animal, a person, or an object; and (e) the potential of an equine activity participant to act in a negligent manner that may contribute to injury, death, or loss to the person of the participant or to other persons, including but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant;
6. **FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES PARTICIPANT INCURS AS A RESULT OF PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES;**
7. **WARRANT AND REPRESENT** that, if the Activities involve horses, Participant is adequately qualified and experienced to both (a) safely handle and ride a horse in a manner to protect Participant and other third parties, and (b) participate with groups of riders and horses, such as to take adequate defensive action to avoid injury from third party participants and horses. Furthermore, Participant understands that it is Participant's responsibility to ascertain the adequacy of Participant's training and experience, the adequacy and training of Participant's horse, and for Participant conduct himself/herself in a manner such as to make the Activities safe and enjoyable for all participants;
8. **HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE AQHA, AQHF, AND/OR AQHA CORPORATE PARTNERS OR THEIR RESPECTIVE ADMINISTRATORS, DIRECTORS, AGENTS, OFFICERS, MEMBERS, VOLUNTEERS, AND EMPLOYEES, AND, IF APPLICABLE, OWNER AND LESSORS OF PREMISES ON WHICH THE ACTIVITIES TAKE PLACE, (EACH CONSIDERED ONE OF THE "RELEASEES" HEREIN) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES WHENEVER OR HOWEVER ARISING AS TO INJURY, DEATH AND/OR PROPERTY DAMAGE OCCURRING AS A RESULT OF PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES OR CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.**
9. **AGREE** to indemnify, hold harmless and defend RELEASEES from any and all liability, whenever or however arising, from all third party claims, demands, causes of action, suits, judgments, liabilities, costs and expenses of any nature arising out of (i) Participant's negligent act(s) or omissions during or related in any way to the Activities; and/or (ii) Participant's willful act(s) or omission(s) during or related in any way to the Activities; and/or (iii) any misinformation or misrepresentations made by Participant in this Agreement. Participant agrees to pay any of RELEASEES costs, expenses and reasonable attorney fees incurred, arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.
10. **AGREE** that this Assumption of Risk/Release of Liability/Indemnity Agreement ("Agreement") (a) shall bind me, my family, my heirs, legal representatives, successors and assigns; (b) shall be governed by the laws of the State of Texas; and (c) shall be subject to the exclusive jurisdiction of the state and federal courts located in Potter County, Texas.

**PARTICIPANT HAS READ THIS AGREEMENT, FULLY UNDERSTANDS ITS TERMS, UNDERSTANDS THAT PARTICIPANT IS GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAS SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE VOID, VOIDABLE, INVALID OR INOPERATIVE, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT AS THOUGH SUCH VOID, VOIDABLE, INVALID OR INOPERATIVE PROVISION HAD NOT BEEN CONTAINED HEREIN. . By submitting this document to AQHA, I hereby agree to be bound by all the terms and conditions of AQHA's Official Handbook of Rules and Regulations.**

**Participant's Signature (REQUIRED):** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name and relationship of owner(s) of horse if different from Participant:** \_\_\_\_\_



# 2021 AQHYA World Team Guidelines

- Sponsorship requirement (\$150) must be met by the Youth Show in June.
- Any sponsorship money collect must be given to SCQHA. If you collect any money for your own personal expenses, you must tell the sponsor the money is not for your team position. You must also state what SCQHYA provides to you for your expenses. Personal sponsors will not receive any benefits from SCQHYA. If you are found in violation of this rule, you will be removed immediately from the team.
- All team members who are not active member of SCQHYA will be required to pay \$300 to SCQHYA in order to be on the team. (Youth who have requested a Change of Affiliation and have not received SCQHA points during the qualifying period.)
- Complete the intent packet and submit it to the Youth Advisor by the Youth Show in June. Please include a copy of the papers for each horse to be shown and a copy of AQHA card.
- Team members will receive clothing for the parade of states if they provide the \$150 in sponsorship money.
- If you are offered a Team position, you have 24 hours to decide if you wish to accept. After accepting verbally or by signature, if for any reason other than death or illness of horse or member of his/her family, you do not participate, you must repay the association for entry fees, stall fees and any other expenses such as clothing.
- All dates will be strictly enforced. Please be timely in returning information.
- You may also compete in Public Speaking, Talent Competition, Horse Judging, and Horse Bowl. If there is enough interest, a Horse Judging Team and/or a Horse Bowl team will be formed. We encourage you to participate in these facets of World Competition. SCQHYA will reimburse a participant who is only competing in non-mounted competitions in the amount of entry fees and shavings monies.
- The South Carolina Quarter Horse Youth Association will pay all entry and stall fees and each team member will receive \$50 for shavings. Team clothing will be provided. Any other expenses are responsibility of the team member including transportation and lodging.

## **AQHYA World Show Qualifying Dates:**

**January 1<sup>st</sup>-May 31<sup>st</sup>**

I \_\_\_\_\_ have read and understand the requirements for the SCQHYA World Show Team.

Exhibitor Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_





Advisor Use Only:

Packet Received:
Sponsorship Money Received:
Entries Completed:
Fee for Change of Affiliation: (for non active members)

## 2021 AQHA Youth World Show Sponsorship Form

Each exhibitor is required to collect \$150 in sponsorship money. Please list sponsorship names and amounts in the chart below. **Sponsorships are due to Tara Hurst by June 19, 2021.** These can be mailed or collected at the Youth Show.

Name:	Sponsorship Amount:

Tara Hurst  
 214 Shady Oak Lane  
 Waynesboro, Ga 30830  
 706-551-2234  
[hurst.tara@yahoo.com](mailto:hurst.tara@yahoo.com)