



SIERRA NEVADA HORSE SHOW ASSOCIATION

www.snhsa.org

Member Education & Opportunities Committee

Wednesday & Thursday, June 12-13, 2024 Hope Glynn Derby Clinic Registration Form

Have you ever wanted to practice on the grass field at Franktown Meadows? Now is your chance to learn everything "Derby" from one of the best in the industry, Hope Glynn. Join us for 2 days of education and instruction for riders from the 2' to over 3'6".

PARTICIPANT INFORMATION (one form per participant)

NAME _____ SNHSA Membership # _____

ADDRESS _____ CITY _____ State _____ Zip _____

CELL PHONE # _____ SNHSA Barn Affiliation (if applicable) _____

EMAIL _____

RIDER OVER 18 YEARS OF AGE ___ Yes ___ No *If under 18 years of age, provide EMERGENCY CONTACT NAME & PHONE:* _____

FENCE JUMPING HEIGHT GROUPS

State your preferred fence height group from 2' to 3'6"+. Session levels and times will be based upon the number of participants within each jumping height group.

Fence height groups: _____ 2'-2'3" _____ 2'6"-2'9" _____ 3'0"-3'3" _____ 3'6"+

ENCLOSED IS \$ _____ TO COVER 50% DEPOSIT DUE BY **WEDNESDAY, JUNE 5.**
Or ENCLOSED IS \$ _____ Full Amount **(THE BALANCE IS DUE BY JUNE 12.)**

FULL FEE AMOUNT IS DUE WITH LATE REGISTRATIONS BUT PREFERRED GROUP MAY BE FULL.

CHECK ITEM YOU ARE PAYING FOR:

SNHSA MEMBER FEES

_____ \$500 both days
 _____ \$300 Wednesday
 _____ \$300 Thursday
 _____ \$75 Audit fee both days
 _____ \$50 Audit fee Wednesday
 _____ \$50 Audit fee Thursday

NON-MEMBER FEES

_____ \$600 both days
 _____ \$400 Wednesday
 _____ \$400 Thursday
 _____ \$100 Audit fee both days
 _____ \$75 Audit fee Wednesday
 _____ \$75 Audit fee Thursday

**Clinic questions? Call Annelise Appleseth (651) 497-7827
or Susan Howe (775) 750-6475 or email susanhowe@gmail.com**

3 ways to pay & register: Pay to the order of SNHSA

- **MAIL** form and check payment to:
SNHSA, P.O. Box 19622, Reno, NV 89511
- **EMAIL** Form to susanhowe@gmail.com and pay by Zelle using this email contact: snhsa.treasurer@gmail.com
- **Register online:** <https://snhsa.org/2024-hope-glynn-derby-clinic-registration-form/>

LIMITED STABLING Available:

Contact Lynne MacLean directly:
(775) 755-4261
Lynne@franktownmeadows.com

SNHSA WAIVER AND RELEASE (Sign this release for SNHSA, then Sign the attached Waiver and Release for Franktown Meadows)

I, the undersigned, acknowledge that as a rider/competitor, I am subjecting myself to certain risks or injury or damage to either horse, rider or equipment. Knowing these facts, I nevertheless, in consideration of your accepting me as a clinic participant, do hereby for myself, my heirs, executors, and administrators, agree to waive, release and hold harmless Hope Glynn, SNHSA, Franktown Meadows Equestrian Center, their employees, agents, or representatives paid or unpaid, from any accident, death, injury, damage or theft that might occur to me, my horses, family, friends, or personal property while at Franktown Meadows. I have read the above statement and understand my rights.

Signature of Rider (if over 18 years of age) _____ Date _____

Signature of Parent/Guardian _____ Date _____

Franktown Meadows

EQUESTRIAN FACILITY

4200 Old US Hwy 395 North, Washoe Valley, NV 89704 * P (775) 849-1600 * F (775) 849-1611 * lynne@franktownmeadows.com

RELEASE, INDEMNITY AND WAIVER OF CLAIM FOR INJURY OR DAMAGE

YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

I hereby acknowledge that I have voluntarily either applied to board a horse with FRANKTOWN MEADOWS, Inc., a Nevada corporation or to participate in instruction or training at FRANKTOWN MEADOWS RIDING ACADEMY facilities or conduct activities at the Property (collectively, the "Horse Activities") (Franktown Meadows, Inc. and Franktown Meadows Riding Academy collective, "Franktown Meadows"). In consideration for permitted to participate in such Horse Activities, I agree as follows:

1. I understand that the horse stabling, training, exercising, and riding are by nature dangerous activities that involve the risk of serious injury and/or death and/or property damage. With such knowledge, I voluntarily undertake the Horse Activities with knowledge of the danger involved and hereby agree to accept all risks of injury or damage. Accordingly, I hereby release, waive, and discharge Franktown Meadows, its officers, directors, shareholders, employees, heirs, and agents (collectively the "Releasees") from, and in connection with, all liability, claims, demands, causes of action, dangers, costs, and expenses arising out of or in any way relating to damages, death, liability, or injury to me and or representatives, distributes, guardians, assigns, heirs, successors, and my personal property and resulting from, or in any way relating to: (i) the negligence or other acts, howsoever caused, Releasees, or (ii) in connection with any Horse Activities at the Property. I hereby assume all riding damage, death or injury to me or my property, and I am that the Releasees shall be exempted from liability whatsoever with respect to my activities at the Property, except in the event of the intended misconduct of the Releasees. To the fullest extent permitted by law, such assumption, waiver and extended from liability shall include, with limitation, any damages, losses, costs, expenses (including reasonable attorney fees), liabilities, court actions or proceedings arising in connection with any of the matters described herein.

2. To the fullest extent permitted by law, I shall indemnify, defend, protect and hold Releasees harmless and against any and all claims, loss, costs, liability, damage and expense, including without limiting reasonable attorneys' fees, incurred in connection with or arising in whole or in part from any cause whatsoever in, or on or about the Property, including without limitation (i) damage, injury or death to me, my horse or any personal property, (ii) any damage, injury or death to any person or property arising from or resulting from my participation in any Horse Activities at the Property, (iii) the use or manner of use of the Property by me or any or my invitees, employees or family members (iv) the condition of the Property, and (v) any of my acts, omissions or negligence in, on or about the Property, or the acts, omissions or negligence of my invitees, employees or family members in, on or about the Property.

3. I have inspected the stable, indoor riding ring, outdoor riding areas, paddocks, and the remainder of the Property, and accept them in their natural condition, understanding by reason of the natures they may have hidden or obvious defects. I agree not to hold Franktown Meadows, its officers, directors, shareholders, employees, heirs, and agents liable for any injury to persons, horses, or property caused by reason of any such defect.

**FRANKTOWN MEADOWS, INC. RELEASE, INDEMNITY
AND WAIVER OF CLAIM FOR INJURY OR DAMAGE**

4. I represent that I will undertake only those horse-related activities that I am competent to perform and will not permit any other person to use any of my horses unless such person is certain that such person is

competent to do so. I, therefore, release the Releasees from any liability whatsoever for personal injury or property damage to me or any person on the Property for Horse Activities or other purposes with my permission, whether or not such person is under instruction by any other person at the time of such injury or damage.

5. I further understand that Franktown Meadows is a corporation which leases the Property and is under no obligation to provide insurance for me or my invitees, family or employees, or my horses or property. If I chose to leave saddles, tack, trailers, or other property on the Property, Franktown Meadows may at its discretion, permit me to do so as an accommodation only, but shall not be responsible for theft, loss or damage to any such property.

6. I further expressly agree that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Nevada and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

7. Any controversy between me and Releasees involving construction, application, interpretation or enforcement of any of the terms, provisions or conditions of this Agreement, on the written request of either party served on the other, shall be submitted to mandatory and binding arbitration. Said arbitration shall comply with and be governed by the provisions of the Nevada's Uniform Arbitration Act. The undersigned and Releasees shall each appoint one (1) person to hear and determine the dispute. If the two (2) so appointed as arbitrators are unable to agree, then those persons shall select a third impartial arbitrator whose decision shall be final and conclusive upon both parties.

8. Any arbitration or court proceeding shall be conducted in Washoe County, Nevada.

9. The prevailing party shall be entitled to reasonable attorney's fees incurred in such dispute, arbitration and court proceedings.

I have carefully read this Release, Indemnity and Waiver of Claim for Injury or Damage and fully understand its contents. I am aware that this is a release of liability and a contract between myself and FRANKTOWN MEADOWS and the other Releasees, and each of them, and sign it on my own free will, and further agree that no oral representations, statements, or inducements apart from the foregoing written agreement have been made.

Participant(s) _____ Age(s) _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Name of Parents/Legal Guardian _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Participant Signature _____ Dated _____

Parent/Legal Guardian _____