**Windsor Essex CADORA – Clinic Participant Agreement**

In consideration of Windsor Essex Cadora and Freedom Equestrian Centre hosting a Janet Riley Massage Clinic, May 27/2017 – The Clinic is an all-day event, 9-5 costing **$35 for members** and **$55 for non-members**. Participants **must be 13 years of age** or older. Clinic fees must be paid in full and received no later than May 20, 2017. Participant may bring one horse to share between two participants, a horse will be provided if needed. Unfortunately, due to the nature of the clinic no auditing positions will be available.

This Agreement is for (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in a one day Learn How to Massage Your Own Horse Clinic.

**All fees are non-refundable, however in the event the participant is unable to attend the clinic due to any unforeseen circumstance, every effort will be made to replace that person with another participant. If a replacement can be found, monies will be refunded at that time.**

**All participants are asked to bring a food item to share in the potluck. Details of the potluck will be emailed to you and posted on the Windsor Essex CADORA Facebook page.**

Participants also agrees to hold harmless Freedom Equestrian Centre & Windsor Essex CADORA, its owners, boarders, horses and guests. By signing this document, you will waive certain legal rights including the right to sue or claim indemnity against Freedom Equestrian Centre & Windsor Essex CADORA and you freely accept and fully assume all risks and dangers and the possibility of personal injury, death, property damage, expense and loss resulting therefrom. By signing below, participant agrees to all terms of this agreement and considers this contract binding.

Participant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deliver completed registration forms and payment to:

Sarah Reaume

184 Texas Rd

Amherstburg, ON

N9V 2R7