

## 2023 REGISTRATION AND RELEASE FORM

FACILITY USE - MEMBERSHIP - DONATIONS

**EVERY PERSON/FAMILY** entering the Park to work with horses and/or stay overnight is **REQUIRED to register**, sign liability release, and pay fees on-site or online (www.wahorsepark.org) prior to unloading horse(s). Children under 18 yrs. must be accompanied by an adult and have a parent/legal guardian sign the release form.

Your Name			_Today's Date	_/21	021 WSHP Member#	#	
Address		City		Sta	ateZip		
Phone		Email_					
Emergency Contact: Name	Emergency Contact: NamePhone						
Tow Vehicle - Make, Model, Lic. Plate			2 <sup>nd</sup> Adult	name (if included)_			
Children under 18 yrs. (if included)_							
A. FACILITY USE- Stalls and RV must be reserved at least 24 hours in advance at www.wahorsepark.org to ensure availability.							
	Standard Fee	Reg.Member	Season Pass			Total \$	
Outdoor Arena/Trail Use (per horse, per day, 3 hour max.)	□ \$15	□ \$12	□ FREE X	# Horse(s)	X # Day(s)	= \$	
Covered Arena	Not Available	Included	Included				
Overnight Stall - incl. 1 bale shavings (per horse, per night - stall left stripped)	<b>□</b> \$30	\$25	□ \$25 X	# Horse(s)	X # Night(s)	= \$	
Stall Cleaning - if stall not stripped.	□ \$25	□ \$25	□ \$25 X	# Stalls	X N/A	= \$	
Additional shavings (per bale)	□ \$12	<b>□</b> \$12	□ \$12 X	# Bale(s)	X N/A	= \$	
<b>RV Hookup</b> - (per vehicle, per night; NO HORSES in spaces #2-15)	<b>□</b> \$45	\$40	□ \$40 X	# RV(s)	X #Night(s)	\$	
<b>Dry Camp</b> (per person, per night; Youth under 18 stay free)	□ \$10 Adult □ \$0 Youth		\$8 Adult X	#Adult(s) # Youth(s)	X #Night(s) X # Night(s)	= \$	
Cross Country Schooling (2-hour ride; fee is per horse, per ride) - Advanced Park Approval REQUIRED							
XC Schooling <b>Trainer Name:</b> Trainer MUST be on course with you at all times while schooling.							
XCAdult Rider (per ride, 18 and up)	□ \$60	\$50	□ \$50 X	# Rides	X # Day(s)	= \$	
XCYouth Rider (per ride, under 18)	<b>□</b> \$45	<b>□</b> \$40	□ \$40 X	# Rides	X # Day(s)	= \$	
Holding Stall - 4 hr. max, no shavings (per horse, must clean before leaving)	□ \$10	<b>□</b> \$8	□ \$8 X	#Horse(s)		= \$	
					(A) Total	= \$	
<b>B. MEMBERSHIP</b> - Receive discounts on recreational use of the Park, special event invites, & more. All memberships are January - December of current year. For more information see visitor kiosk or www.wahorsepark.org							
Regular Membership - Receive discounts for recreational use of Park Facilities, as noted above.  □ \$50 Individual Adult □ \$35 Individual Youth □ \$80 Family (2 adults & children under 18 yrs. All must live in the same household. Complete names & signatures on release.)							
Pass Membership - All Regular Member benefits plus FREE recreational use of trails & arenas April-October.  □ \$140 Individual Adult □ \$70 Individual Youth □ \$180 Family (2 adults & children under 18 yrs. All must live in the same household. Complete names & signatures on release.)  (B) Total =\$							
C. DONATION-ThePark is a charitable 501(c)(3) non-profit organization (Tax ID# 33-1197391).							
All support, no matter how big or small, helps the Park. Thank you!  (C)Total = \$							
Cashor checks payable to WSHP (A + B + C) TOTAL DUE \$							

www.wahorsepark.org - 1202 Douglas Munro Blvd./PO Box 278, Cle Elum, WA 98922 - 877.635.4111 - director@wahorsepark.org

## WASHINGTON STATE HORSE PARK - 2023 VISITORS RELEASE OF LIABILITY FOR PROPERTY DAMAGE, PERSONAL INJURY OR DEATH

I choose to participate voluntarily in Equine Activities, as that term is defined in RCW 4.24.530(2), at the **Washington State Horse Park** ("WSHP"). The WSHP is an equine activity sponsor, as that term is defined in RCW 4.24.530(3). I am fully aware of and acknowledge that Equine Activities involve inherent dangerous risk of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering or death ("Harm").

I agree to release WSHP Authority and the individual WSHP Board members, their agents, assigns, employees and contractors and members, the City of Cle Elum and Suncadia, LLC (hereinafter collectively referred to as the "Released Parties") from all claims for money damages or loss for any Harm to me, my injury or death, the injury or death of my child(ren) named below ("Child") or my horse or for any Harm caused by me or my horse to others, even if the Harm, directly or indirectly, resulted from the negligence of the Released Parties.

I agree to expressly assume all risks of Harm to me or my child or my horse. I also expressly assume all responsibility for handling and transporting my horse while at WSHP.

I agree to indemnify the Released Parties and to hold the Released Parties harmless from all claims, causes of action and money damages resulting from Harm to me, my Child, or my horse while I am participating in Equine Activities at the WSHP facility.

Under Washington State law, except as provided in RCW 4.24.540(2), an equine activity sponsor or an equine professional shall not be liable for an injury or the death of a participant engaged in an equine activity, and, except as provided in subsection(s) of this section, no participant nor participant's representative may maintain an action against or recover from an equine activity sponsor or an equine professional for an injury to or the death of a participant engaged in an equine activity.

I have read and understand the Rules and Regulations of WSHP that are posted on the WSHP property. I understand these rules and regulations of WSHP will be changed from time to time and I agree to abide by the changed rules. I represent that I and/or my child have the requisite training, coaching and ability to participate safely in the activities we chose to pursue at WSHP.

**COUNTERPART SIGNATURES** This Agreement may be signed in counterpart, each signed counterpart shall be deemed an original, and all counterparts together shall constitute one and the same agreement.

**ELECTRONIC DELIVERY AND SIGNATURES** Electronic delivery of documents (e.g., transmission by facsimile or email) including signed documents and notices shall be legally sufficient to bind the party the same as delivery of an original. At the request of either party the parties will replace electronically delivered signatures with original documents with original signatures. The parties acknowledge that a signature in electronic form has the same legal effect as a handwritten signature.

## RELEASE OF PHOTOGRAPHIC AND VIDEO IMAGES

I hereby give permission to WSHP and those acting with its authority the unrestricted right and permission to use, publish and republish any photographic or video images of me and/or my horse for promotional and marketing purposes of the Horse Park. I also permit the use of any printed material in connection therewith and relinquish any right to review or restrict its use or publication.

I have read and understand these Releases; my signature below signifies my acceptance of their terms and conditions. <u>I agree</u> these Releases shall remain in full force and effect until they are specifically revoked by me in writing or superseded by new releases issued by the Horse Park and signed by me.

TODAY'S DATE	
YOUR NAME	SIGNATURE
• • • • • • • • • • • • • • • • • • • •	family member who will be using the Park (family is up to two adults and children under 18 yrs living in the same househol arent/legal guardian sign this release. PLEASE SIGN AN ADDITIONAL RELEASE IF SIGNING FOR MORE THAN TWO CHILDRE
2 <sup>nd</sup> Adult's Name	Signature
Child (under 18) Name:	Date of Birth
Child (under 18) Name:	Date of Birth

If Family you MUST list each immediate family member who will be using the Park (family is up to two adults and children under 18 yrs. living in the same household). ALL Children under 18 yrs. must have a parent/legal guardian sign this release. PLEASE SIGN AN ADDITIONAL RELEASE IF SIGNING FOR MORE THAN TWO CHILDREN.