



## 6<sup>th</sup> Annual PHAC JUNIOR SHOWMANSHIP CLINIC June 5-6, 2010

**Hosted by - PARADISE RANCH - Vernon, B.C.**  
**7886 - Bench Row Road, Vernon, B.C. V1H 1H3 (250) 558 - 4743**

Are you ready for a fun-filled weekend? The 2010 Junior Clinic is scheduled for Jun 5 - 6, 2010. The clinic will be held in Vernon B.C. at Paradise Ranch.

This clinic is **FREE** to all juniors who are residents of North America. What a great way to start off a new season of riding, sharing a weekend with old friends and making new ones.

Kim Monte from Texas USA has agreed to teach the clinic again this year. As a former junior rider herself, Kim has earned the title of High Point Junior many times and later won several National Championship and Laureado titles. Kim is also a highly respected carded Judge, Ring Steward and Show Steward.

Enclosed you will find a Registration form, Wavier and Things you need to know. Schedule of Events to follow at a later date. Please fill out the registration form and return to Cindy Zaitsoff at Paradise Ranch either by Mail or Fax, by May 1<sup>st</sup>, 2010. All of us at Paradise Ranch look forward to seeing you in June.

Additional registration forms, wavier and a map to Paradise Ranch will be available on both the PHAC ([www.phac.ca](http://www.phac.ca)) and Paradise ([www.paradisehorses.com](http://www.paradisehorses.com)) websites. Also, the PHAC Junior Sponsorship Fund outlining the details of the program can be found on the [www.phac.ca](http://www.phac.ca) website. Once you have completed the clinic, you will receive a \$50.00 Gift Certificate towards participation at this year's Canadian National Show in Cloverdale, B.C.

For more information please call or email Cindy at Paradise Ranch  
Phone: (250) 558 - 4743 Fax: (250) 558 - 4773 Email: [info@paradisehorses.com](mailto:info@paradisehorses.com).

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**THINGS YOU NEED TO KNOW**

- Plan on arriving at Paradise Ranch on Friday June 4<sup>th</sup> in the afternoon, Pizza Party will start at 7 pm.
- All meals are provided, any special requests, contact Cindy prior to clinic.
- Inside box stalls or outside paddocks are available for the weekend, all with automatic water.
- Please bring all your own tack, grooming tools, feed and feed buckets for your horse for the weekend.  
**Riding Helmets are Mandatory.**
- Clinic will be held either inside or outside, depending on weather conditions.
- Safe and supervised accommodations will be provided. Please bring sleeping bag, pillow, swimsuit, towel and other personal items.
- Please plan on staying for lunch and awards on Sunday, should wrap up around 2pm.
- Those travelling are welcome to stay for a Monday departure.

# PHAC JUNIOR SHOWMANSHIP CLINIC

Registration Form, Please fill out and return by mail or fax with signed waiver  
Helmets are mandatory

Junior Name: \_\_\_\_\_ Male or Female

Junior Age: \_\_\_\_\_

Do you need a loaner horse? Yes or No

Have you shown a Peruvian? Yes or No

Riding Level: Novice / Intermediate / Advanced (please circle)

What do you most want to learn at this clinic? Do you have specific areas that you would like to work on  
With your horse:

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Horses Name: \_\_\_\_\_ Mare or Gelding

Parent Name: \_\_\_\_\_

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

\_\_\_\_\_

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

Emergency Contact: Name & Number:

\_\_\_\_\_

Health Care Number Junior: \_\_\_\_\_

Health Concerns (E.g.: Allergies, Asthma): \_\_\_\_\_

T-Shirt Size (Adult): Small Medium Large (please circle)

Estimate Arrive Time Friday: \_\_\_\_\_ Depart Sunday Evening or Monday

Please indicate number of Family members attending:

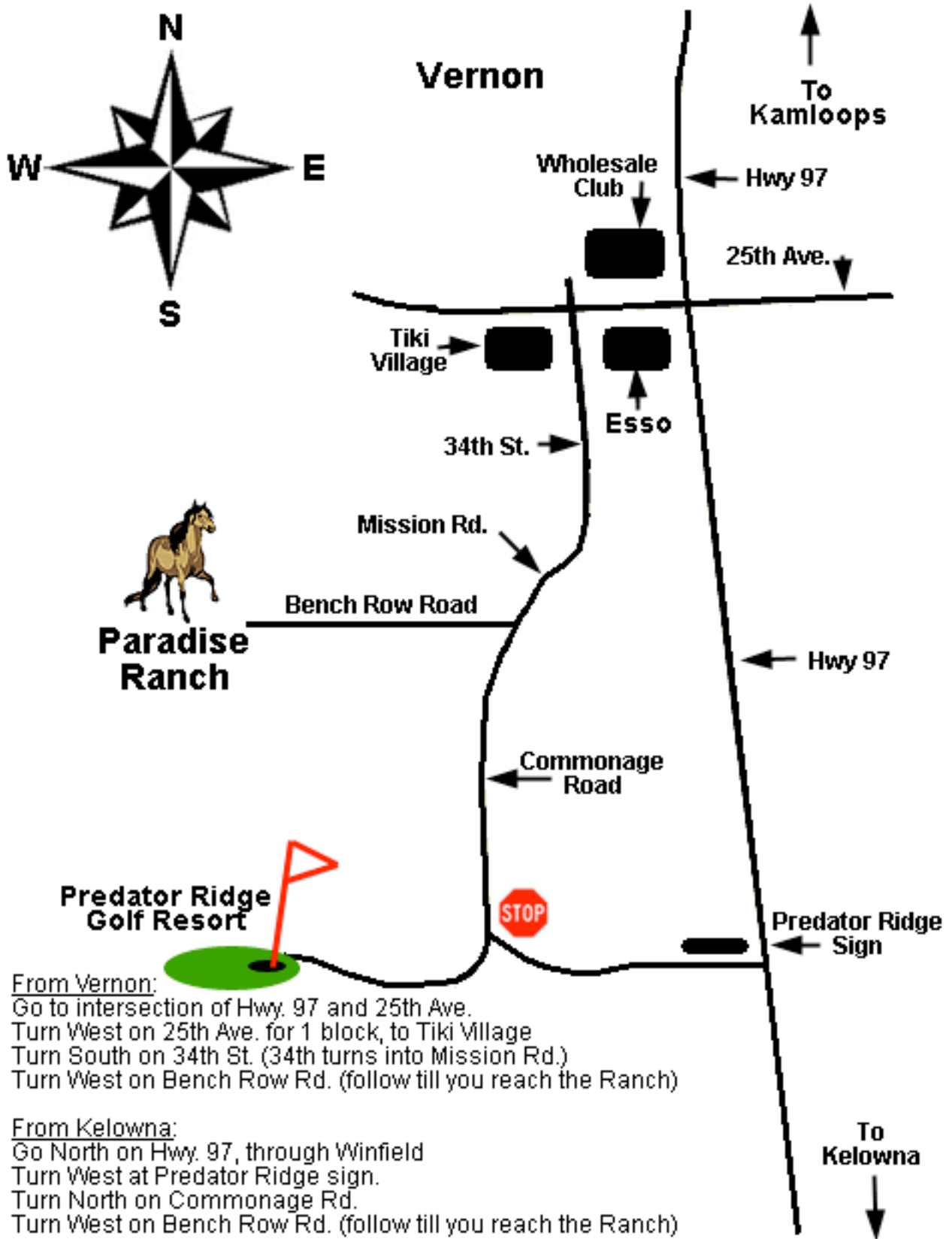
Friday night Pizza party: \_\_\_\_\_ Saturday night Barbeque: \_\_\_\_\_

Items to bring: Sleeping bag, pillow, swimsuit & Towel.

Parents or Family members requiring hotel accommodations please contact Cindy.

**For additional information or questions, please call Cindy at Paradise Ranch  
Phone: 250-558-4743, Fax: 250-558-4773 or email at  
[info@paradisehorses.com](mailto:info@paradisehorses.com).**

# MAP TO PARADISE RANCH



From Vernon:  
Go to intersection of Hwy. 97 and 25th Ave.  
Turn West on 25th Ave. for 1 block, to Tiki Village  
Turn South on 34th St. (34th turns into Mission Rd.)  
Turn West on Bench Row Rd. (follow till you reach the Ranch)

From Kelowna:  
Go North on Hwy. 97, through Winfield  
Turn West at Predator Ridge sign.  
Turn North on Commonage Rd.  
Turn West on Bench Row Rd. (follow till you reach the Ranch)

## ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants Under 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!**

### The Parent/Guardian Must Read and Understand this Waiver Prior to Infant 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 on behalf of the Infant Participant named below with and for the benefit of: \_\_\_\_\_

\_\_\_\_\_ **Paradise Ranch** \_\_\_\_\_, its directors, officers, employees, volunteers, business operators, agents, and site property owners or lessees (the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips or riding instruction provided by the "Host" to the Infant Participant.

### Initial Each Item below after Reading and Understanding each item:

1. I am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the Infant Participant in my capacity as Parent/Guardian and with the intent that his waiver be binding on myself and the Infant Participant for all legal purposes.
2. I am aware that there are inherent dangers, hazards and risks ("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; and
  - (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.
3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities".
4. 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 on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".
5. In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree:
  - (a) to waive all claims that the Infant Participant has or may have in the future against the "Host";
  - (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" 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 the Infant's participation in "Equine Activities".
6. 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".
7. 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 the "Host", myself as Parent/Guardian, and the Infant Participant, and it is binding on myself, the Infant Participant and our "Legal Representatives".

### Please Print Clearly

Infant Participant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Parent/Guardian's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

\_\_\_\_\_  
(Signature of Parent/Guardian of Infant Participant) Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Print Name of "Host" Witness to Signing and Initialing)

\_\_\_\_\_  
(Signature of "Host" Witness)