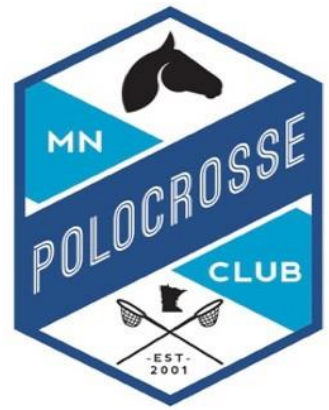


THE MINNESOTA POLOCROSSE CLUB

2018 Clinic & Play Date
June 22-24, 2018



 Finch Family Farm | 13580 40th Street South, Afton, Minnesota 55001

This is an extraordinary opportunity to learn from and play with one of the well-known players in the United States, who has competed in polocrosse tournaments across North America and Internationally.

While having FUN with polocrosse, we will...

- Build confidence in your abilities while mastering the basics of polocrosse
- Improve your racket skills
- Teach you to play as a team
- Help you to train your horse to play polocrosse
- Develop better balance and communication for both horse and rider

We encourage all level of players from the very beginner to International levels, as well as all age groups. Riders will be divided into groups based on their knowledge, riding experience, polocrosse and riding skills. We want players to have a better understanding of the sport and improve their personal game. Spread the word about polocrosse and come join us for some fun!

Featuring US Nationals and World Cup Clinician Prissy Rumel:

- World Cup appearances as player, coach, and umpire
- American Polocrosse Association Board Member

OVERVIEW

Friday – Saturday
Clinic & Drills

Sunday
Mixed Scrimmage

MEALS

B/L/D for Friday & Saturday
B/L for Sunday.
Included in player registration.

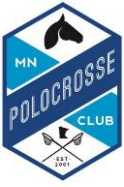
REGISTRATION DUE BY JUNE 08, 2018

Rider's Name & Age:	
Street Address:	
City, State:	Zip Code:
Home:	
Email Address:	
Mother or Guardian's Name:	Phone:
Father or Guardian's Name:	Phone:
Emergency Contact:	Phone:
Insurance Information:	
Allergies or Medical Concerns:	
Horse Name:	Breed:
Extra meal plan for parents (\$60 per person):	Names of those with extra meal plan:
Sunday Tournament Only (\$50):	

PLEASE SEND:

1. Make checks payable to Minnesota Polocrosse Club for \$275 per participant.
(Non-members of MPC \$300)
2. \$50 for Sunday tournament only. (Non-MPC members \$75) No meal or T-Shirt.
3. Send completed registration forms to:
Terry Hawkins, Landmark Mortgage, 200 State Road 35 N, Dresser, WI 54009
4. Parental/Guardian authorization of attached activity release. Rider not allowed to participate without the completed release.
5. Rider's required to bring e-pens or temporary fencing. Horses will be kept in fenced in pasture but we require e-pens as well.

Questions: Please call Kristy Gusick #651-592-4662



FINCH FAMILY FARM RELEASE OF ALL CLAIMS ACKNOWLEDGEMENTS

I wish to participate in equestrian activities under the supervision of Finch Family Farm 13580 40th Street South, Afton, MN 55001.

I understand and agree that the use, handling and riding of a horse involves a risk of physical injury to any individual undertaking such activity. I further understand and agree that any horse, irrespective of its training, its usual past behavior, and its characteristics, may act or react unpredictably at any time.

With full awareness of the forgoing, I am knowingly and voluntarily participating in equestrian activities at Finch Family Farm and accept the possibility of injury to myself as a risk inherent in work on and around horses.

In consideration of my being permitted to enter the premises of Finch Family Farm and to participate in equestrian activities, and for other good and valuable consideration, the receipt and sufficiency of which I hereby acknowledge, I promise and agree as follows:

1. WARRANTIES AND REPRESENTATIONS:

1. 1.1 I understand that horseback riding and training is a rigorous activity and is physically and mentally demanding. I hereby warrant and represent that I have the requisite level of physical fitness and mental awareness to enable me to participate in riding instruction. I further warrant and represent that I am in good physical health and free from injury, illness, disease or other defects which may impair my ability to engage in such activities.
2. 1.2 I recognize the threat of exposure to tetanus that exists in the presence of livestock and acknowledge my responsibility to obtain inoculation and maintain protection against tetanus, a disease endemic to horses.

2. RELEASE

I hereby release and forever discharge Finch Family Farm and its agents and all the heirs, successors and assigns of the forgoing parties (collectively, the "releasees"), from any and all liability for an and all losses, claims, demands, actions, causes of actions, damages, costs and expenses which I may hereinafter incur on account of any loss, damage, or injury (including death) to my person or properties, or the consequences thereof, which result from any accident, transaction, event, circumstance, occurrence, act or omission connected with or arising from equestrian activities, or while I am upon, entering or departing the premises of Finch Family Farm, whether caused by the negligence of releasees or otherwise.

3. INTENT

The release contained in paragraph 2, above is intended to be broadly construed so as to release releasees from all claims whatsoever arising out of any accident, transaction, event, circumstance, occurrence, act or omission including, without limiting the generality of the language in paragraph 2, above, the following:

(A) Any loss, damage or injury (including death) incurred while I engage in equestrian activities, whether such loss, damage or injury arises as a result of the actions or omissions of the releasees, a third party, a horse or other animal, an act of God, or combination thereof; or,

(B) Any loss, damage or injury (including death) incurred while I upon, entering or departing the premises of Finch Family Farm, whether such loss, damage or injury arises as a result of actions or omissions of releasees, third party, a horse or other animal, an act of God, or combination thereof, or as a result of the negligent construction, maintenance or supervision of the buildings and/or grounds of Finch Family Farm; or

(C) Any loss, damage or injury (including death) incurred while I am upon, entering or departing from the premises of Finch Family Farm, whether such loss, damage or injury arises as a result of a fire, storm, explosion or other casualty; or

(D) Any loss, damage or injury (including death) incurred while I am being medically treated for any illness or any injury which may occur while I am engage in equestrian activities or while I am upon, entering or departing the premises of Finch Family Farm.

4. INDEMNITY:

I hereby agree to indemnify and hold harmless releasees, and each of them, from and against any and all claims, damages, costs, expenses or liabilities which they may incur as a result of any accident or injury caused by me while I am engaged in equestrian activities or while I am upon, entering or departing the premises of Finch Family Farm.

5. MISCELLANEOUS:

5.1 This agreement shall be binding upon and inure to the benefit of my heirs, successors, assigns and legal representatives.

5.2 This release shall be governed by and construed in accordance with the laws of the State of Minnesota.

I have read this release and fully understand all of its terms. I have executed this release voluntarily and with full knowledge of its significance.

Dated: _____

Name (please print)

Signature (if over 18 years of age)

Address

City, State Zip

Phone

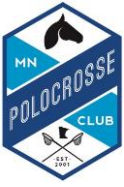
(If under the age of 18 a parent or guardian signature is required)

I am one of the parents of the above named minor applicant/participant (and/or duly appointed legal guardian of such minor), and I have full authority to sign this release for and on behalf of the minor and on behalf of myself. My signature on this form constitutes my understanding and consent to the waiver and release set out above and on behalf of myself and the minor.

Name of parent or legal guardian (please print)

Signature of parent or legal guardian on behalf of Minor applicant /participant and individually

Address and Phone If different from above



Release, Assumption of Risk, Waiver of Liability, and Indemnity Agreement

I **AGREE** for myself, and/or my child, my/our administrators and assigns, in consideration for my, and/or my child's, participation in this Minnesota Polocrosse Club (MPC) activity to the following:

I **AGREE** that I choose to participate voluntarily in an MPC activity, as a rider, driver, handler, lessee, owner, agent, spectator, volunteer, and/or trainer. I am fully aware and acknowledge that horse sports and MPC activities involve inherent dangerous risks of accident, loss, and serious bodily injury including, but not limited to, broken bones, head injuries, trauma, pain, suffering or death ("Harm"). I fully understand that this release covers, but is not limited to, inherent risks of an equine activity which mean a danger or condition that is an integral part of an equine activity, including but not limited to, any of the following:

- The propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine;
- The unpredictability of an equine's reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals;
- Hazards, including, but not limited to, surface or subsurface conditions;
- A collision with another equine, another animal, a person, or an object;
- The potential of an equine activity instructor 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.

I **AGREE** to release the MPC, its successors or assigns, officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations from all claims including, but not limited to, claims for money or property, disability, covenants, actions, suits, causes or action, obligations, debts, costs, expenses, attorneys' fees, judgments, orders and liabilities of whatsoever kind or nature in law, equity or otherwise, whether now known or unknown, suspected or unsuspected, and whether concealed or hidden, including but not limited to any state or federal statutory or common law claim or remedy of any kind whatsoever arising out of or in any way connected with any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the MPC or the MPC activity.

I **AGREE** to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the MPC or the MPC activity, and **specifically agree to the applicable state statute/law regarding equine/farm animal activity liability and signed posting (if any), in any state in which I or my child participates in an MPC activity.**

Below are the state statutes and select portions of those statutes believed to be in effect at the time of the execution of this agreement is attached hereto.

MINNESOTA MN ST § 604A.12

A nonprofit corporation, association, or organization, or a person or other entity donating services, livestock, facilities, or equipment for the use of a nonprofit corporation, association, or organization, is not liable for the death of or an injury to a participant resulting from the inherent risks of livestock activities.

WISCONSIN

WI ST 895.481 NOTICE: A person who is engaged for compensation in the rental of equines or equine equipment or tack or in the instruction of a person in the riding or driving of an equine or in being a passenger upon an equine is not liable for the injury or death of a person involved in equine activities resulting from the inherent risks of equine activities, as defined in section 895.481(1)(e) of the Wisconsin Statutes.

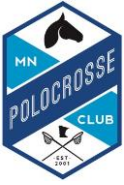
I **AGREE** to review and understand the full applicable state statutes.

I **AGREE** to indemnify (that is, to pay any losses, damages, or costs incurred by) the MPC and the MPC activity and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse in the MPC activity.

I **AGREE** that neither I, nor any one claiming through me, will hereafter bring, commence, prosecute or maintain, or cause or permit to be brought, commenced, prosecuted or maintained, any suit or action, either at law or in equity, in any court in the United States or in any state thereof, or elsewhere, against the MPC, its successors or assigns, for, on account of, arising out of, or in any way connected with any Harm to me or my horse, and that neither I, nor any one claiming through me, will enforce, prosecute, or recover upon, or attempt to enforce, prosecute, or recover upon, any claim or right of action whatsoever, which I, or any one claiming through me, may now have or hereafter assert, in any way connected with claims for Harm to me or my horse, and for claims made by others for any Harms caused by me or my horse at the MPC activity.

I **AGREE** this Agreement is the entire agreement of the parties and supersedes all prior oral and written understandings and agreements. This Agreement may be modified only by a written amendment signed by both parties.

I **AGREE** that if any provision of the Agreement is found to be invalid or illegal by a court of competent jurisdiction, the remaining provisions shall be construed as if the affected provision had not been included in order to effectuate the intent of the parties.



In the event this form is signed by the parent/guardian of a child, then all representations and acknowledgements herein are expressly made by, for, and on behalf of the parent/guardian and child.

By signing below, I **AGREE** to be bound by all applicable MPC rules and all terms and provisions of the USPC activity. I acknowledge that I enter into this release after having read the same and place my signature hereto of my own free voluntary act and deed. By signing below, I represent to the MPC that I fully understand its contents, that I do not need any further explanation, and I waive any further explanation.

I have read and AGREE to abide by the above. REQUIRED — all signatures must be originals, not photocopies.

OR _____

Original Signature of Participant Date Original Signature of Applicant's Parent(s) or Legal Guardian(s) Date

Required if applicant is of the age of majority in their state of residence. Required if applicant is under the age of majority in their state of residence.