

# MillShaw Meadows Equestrian Centre

**Owned and Operated by Cathie Newman & James Clark**  
**1101 Shawnigan-Mill Bay Rd., Mill Bay, B.C. V0R 2P0 / (250)882-8995**

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

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

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

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Provincial Health Number: \_\_\_\_\_ HCBC Number \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Business Telephone Numbers: Mother's \_\_\_\_\_ Father's \_\_\_\_\_

Person to contact in case of emergency, if parents are not available:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Does your child have any health problem that would interfere with participation in riding, if so, please explain below:

\_\_\_\_\_  
\_\_\_\_\_

The Undersigned assumes the unavoidable risks inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider, and spectator.

In consideration, therefore, for the privilege of participating in the riding camp at MillShaw Meadows Equestrian Centre, 1101 Shawnigan-Mill Bay Road, Mill Bay, B.C., in the year of 2024, the Undersigned does hereby agree to hold harmless and indemnify MillShaw Meadows Equestrian Centre, James Clark and Cathie Newman and their agents, employees, heirs and further release them from any liability or responsibility, including actions or claims from third-parties, for accident, damage, injury, or illness to the Undersigned or to any horse owned by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises.

Camp date your child is attending: \_\_\_\_\_

Riding experience (if any): \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_