

GLCC PRINTABLE REGISTRATION FORM
(In Canadian funds, applicable taxes included)

OWNER INFORMATION

First Name	Last Name
Mailing Address	
Street	
City/State	Postal/Zip Code
Country	
Home Phone	Cell Phone
Email Address Preferred	

EQUINE INFORMATION #1

Name	
Breed	
Age	Gender
Size	

EQUINE INFORMATION #2

Name	
Breed	
Age	Gender
Size	

EQUINE - NON-SHOWING

Number of equines [] @ \$50 per equine = \$

VEHICLE INFORMATION - TYPE

Vehicle #1
Vehicle #2
Whip Name

REGISTRATION
DIVISIONS & CLASSES WITH ENTRY FEES & SHOW CHARGES
 (In Canadian funds, applicable taxes included)

Pleasure Driving Division – please use the detailed charts below
 \$150 per division (5 classes) or \$35 per class

Divisions, Classes and Entry Fees

Pleasure Division	Class Turnout	Class Working	Class Reinsmanship	Prog Cones Class	Timed Cones Class
Horse	1	12	23	34	45
VSE	2	13	24	35	46
Small Pony	3	14	25	36	47
Large Pony	4	15	26	37	48
Junior	5	16	27	38	49
Pair or Tandem	6	17	28	39	50
Fours	7	18	29	40	51
Para/COOL/SN	8	19	30	41	52
Coach Assisted	9	20	31	42	53
Utility Vehicle Horse	10	21	32	43	54
Utility Vehicle Pony/VSE	11	22	33	44	55

Pleasure Division Entry - 5 classes - Circle the appropriate division/s above
 \$150 per pleasure division x # _____ = \$ _____

Individual Classes from Pleasure Division Classes - Circle classes desired
 \$35 per class x _____ class # _____
 class # _____ = \$ _____

Specialty Classes Entry Fee – Circle where appropriate

Class 56	Carriage Dog	\$25 per class	= \$ _____
Class 57 A	Costume	\$25 per class	= \$ _____
Class 57B	International	\$25 per class	= \$ _____
Class 58	Drive/Ride	\$25 per class	= \$ _____
Class 59	Red/Green light	\$15 per entry	= \$ _____
Class 60	Concours D'Elegance (no entry required)		

Late Entry Fee \$50 per turnout = \$ _____
 Entries accepted up to July 31st.

*Non showing equine \$50 per equine = \$ _____

***TOTAL OF ENTRY FEES FOR ALL CLASSES = \$ _____**

Forward total to pg 3

REGISTRATION
DIVISIONS & CLASSES WITH RELATED FEES & SHOW CHARGES

Stable – Campsite – Dinner – Membership

STABLE

Stall fees Fri to Mon am \$150 x # _____ = \$ _____
 Includes 2 bags shavings
 No sharing in stall except if VSE, max 2 per stall
 both VSE must be owned by same owner
 Shavings \$8.50 per bag x # bags _____ = \$ _____
 Hay \$10 per bale x # bales _____ = \$ _____
 Ship in Fee \$25 per entry show duration = \$ _____

CAMPSITE RV with power \$150 show duration = \$ _____
CAMPSITE RV without power \$50 show duration = \$ _____

DINNER SATURDAY NIGHT \$50 per ticket x # _____ = \$ _____
SUNDAY BOX MEAL Awards Ceremony require # _____ no charge

MEMBERSHIP in TCCA \$25-junior, \$35-single, \$40-family
 \$80-farm-applies to driver = \$ _____
 Submit Membership & Waiver form

***TOTAL STABLE-CAMPSITE-DINNER-MEMBERSHIP = \$ _____**

SUMMARY OF FEES & CHARGES
 ENTRY FEES pg 2 = \$ _____
 STABLE-CAMPSITE-DINNER-MEMBERSHIP pg 3 = \$ _____
TOTAL PAYMENT DUE = \$ _____
 See Payment Options Below

- NOTE 1 of 5** The show committee reserves the right to combine or cancel classes if less than 3 entries received in any of the listed classes.
- NOTE 2 of 5** Non showing equine must wear their number at all times while on the show grounds.
- NOTE 3 of 5** Stabling deposit is mandatory for cleanup of stalls and campsites. \$75 Deposit is to be made by cheque payable to: Tri-County Carriage Association. Your cheque will be returned to you post satisfactory inspection and prior to your departure
- NOTE 4 of 5** Closure date for entries is 16th of July 2022
 Late Entry Charge Is \$50 per Turnout will be applied from July 17th to July 31st
- NOTE 5 of 5** Overnight Equines on the grounds, must be stalled indoors.

INSURANCE From the 1st of January 2017 forward, all **Canadian** drivers participating in Tri-County Carriage Association’s events including shows, clinics and social drives are required to produce proof of ‘current’ liability insurance coverage of a minimum of \$2,000,000.00 (two million dollars) or an Ontario Equestrian (OE) membership. **All others** bear the responsibility to ensure they have adequate and current insurance coverage.

ONTARIO EQUESTRIAN (OE) Member #
OR NAME OF INSURANCE PROVIDER

Payment Options:
On-line through PayPal (with credit card)
Etransfer treasurer@tricitycarriage.com
Cheque payable to Tri-County Carriage Association
 c/o Jean McLean, 26 Elodia Court, Hamilton ON L9C 7R2

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***Privacy - PIPEDA**

Please be aware that TCCA is a not-for-profit association with the goals of promoting opportunities to enjoy driving, collecting (preserving/restoring/maintaining) equine drawn vehicles of all types, support worthwhile activities for driving members, provide education and to encourage family participation. As per the requirements of the Personal Information Protection and Electronic Documents Act (PIPEDA), your information is not for rent, lease, or otherwise sold. The information is protected from unauthorized access and use as your privacy is valued. Your information is collected for the express purposes of administering the TCCA membership program, send newsletters and sundry announcements of interest to the carriage driving community, plan and communicate upcoming events, and publish to members only, the annual association membership. Completing this form and affixing your signature is clear consent for TCCA to use the information for these purposes.

PHOTOS

I/we give permission to Tri-County Carriage Association to use photos taken at an event for purposes of publications & postings on the TCCA web site and Facebook. Yes No

TRI-COUNTY CARRIAGE ASSOCIATION MEMBERSHIP FORM

VOTING ELIGIBILITY - MUST HAVE BEEN A MEMBER IN THE PREVIOUS YEAR

- Individual \$35.00
- Family \$40.00
- Farm \$80.00 family member +4 named farm drivers
- Youth* \$25.00
 (*21 years of age or under as of January 01, 2022)

RETURN TO

Karen McCrae, Membership, 129 Duke Street, Parkhill ON N0M 2K0
 Phone 519-494-5228 Email kbosi211@gmail.com

Payment by either of these three methods:

- PayPal (credit card payment)
- E-transfer to treasurer@tricitycarriage.com
 mail cheque payable to Tri-County Carriage Association

***Member - Primary Adult**

name first & last _____

***Member - Secondary Adult**

name first & last _____

***Farm / Business Name**

*Address _____ City & Postal Code _____

*EMAIL _____

*Telephone Cell _____

***ADDITIONAL FAMILY MEMBERS** & their 2 children; children to be 21 years of age or under as of January 1, 2022 - family address)

1. _____
- | | | |
|------|--------------|--------------|
| Name | first & last | age of child |
|------|--------------|--------------|
2. _____
- | | | |
|------|--------------|--------------|
| Name | first & last | age of child |
|------|--------------|--------------|

FARM DRIVER(S) * #1 _____ #2 _____
 #3 _____ #4 _____
 Names - first & last of each person

***Farm Category** attached to a family membership for the year.
 Each person listed may drive only equines owned by the assigned Family Member and are not interchangeable within a membership year.

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RELEASE AND ACCEPTANCE OF RISK FORM FOR 2022 - READ IT CAREFULLY.

*I am completing and signing this Release and Acceptance of Risk Form in exchange for being permitted to participate in equine carriage driving and riding and other activities organized by or on behalf of Tri-County Carriage Association.

***ACKNOWLEDGEMENT OF RISK:**

I acknowledge that activities involving equine, related equipment and surroundings involve a high risk of injury and/or death, and that the sport of carriage driving and riding, is a high risk sport and that I am participating at my own risk and in full knowledge that there are significant risks involved in working with and around equine, related equipment and surroundings, including but not limited to the risks posed by my equine, other equine, other drivers and riders, my own abilities, equipment, other animals and the terrain being driven. I further acknowledge that there is a risk that an accident could occur and result in serious injury or death to me, other people and my equine or in serious damage to property. I acknowledge that I am responsible for my own safety during my participation in Tri-County Association activities, and that no one else who is participating in these activities has a responsibility to protect me.

***RELEASE AND ACCEPTANCE OF RISK:**

In consideration of being allowed to participate, I hereby assume all risk, for myself, my heirs, guardians, and legal representatives. I grant a full and final release to, and agree not to make or bring any claim of any kind against Tri-County Carriage Association, its officers, directors, members, employees, volunteers, guests, any land owners, land holders or other persons making property available to the Tri-County Carriage Association and all of their successors and assigns, for any injury, including death, to me or any damage to my property, or to the property of others in my care, custody or control, whether from anyone's negligence or not, or any other cause arising out of my participation in these dangerous carriage driving and riding or related activities scheduled now or in the future.

***I CONFIRM:**

- That this Release and Acceptance of Risk is intended in part for the benefit of the third parties listed above, who, despite not being signatories to this Release and Acceptance, are entitled to rely upon and enforce this Release and Acceptance as though they were contractual parties to it.
- This Release and Acceptance applies not only to my participation in activities on or about the day it is signed, but also to my participation in carriage driving and riding and other activities organized by Tri-County Carriage Association.

Signature (select one):

_____ I hereby declare that I am of legal age and have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my heirs, executors and assigns.

_____ I am under the age of 18 years. My parent or guardian has also signed where indicated below.

_____ By signing and/or submitting this document I agree that TCCA may use photographs of those addressed in this release for TCCA's purposes. I also understand that it is my responsibility to have obtained adequate insurance coverage.

***PARTICIPANT'S NAME** _____

***PARTICIPANT'S SIGNATURE** _____

***ADDRESS** _____

***EMAIL** _____ **PHONE** _____

OE # _____ **IF APPLICABLE**

***EMERGENCY CONTACT #** _____ ***STABLE CONTACT #** _____

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PARENT/GUARDIAN SIGNATURE (AS APPLICABLE)

* _____ I am the parent or guardian of the participant who is under or over the age of 18 years of age when a Guardian is required. I have read and fully understand and agree to the terms and conditions stated above, as they relate to the participant, and I agree on behalf of the participant that the terms and conditions are binding upon the participant and the participant's heirs, executors and assigns. My signature below and submission of this document signifies my intention to grant the Release and Acceptance of Risk described above on behalf of the participant, and I acknowledge the risks to the participant described above.

* _____ signing and/or submitting this document I agree that TCCA may use photographs of those addressed in this release for TCCA's purposes. I also understand that it is my responsibility to have obtained current and adequate insurance coverage.

*PARENT/GUARDIAN NAME _____

*PARENT/GUARDIAN SIGNATURE _____

*WITNESS BY _____

*DATED _____

PLEASE CONTACT JEAN McLEAN AT mclje22.trail524@gmail.com
FOR ADDITIONAL INFORMATION FOR THE GREAT LAKES CARRIAGE CLASSIC