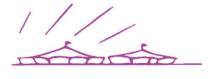
T: (902)798-0000 / F: (902)798-2999 hantscountyex@eastlink.ca www.hantscountyex.com Follow us on Facebook!



P.O. Box 368, Windsor, Nova Scotia B0N 2T0 221-239 Wentworth Road Exit 5A off Highway 101



(Entries must be received by the office on or before **August 30th**)

SHOW MANAGER: Lisa Hines

- All competitors must report to the show office before showing.

GYMKHANA - MBRA RULES WILL APPLY

- Horses must be walked into the ring. Riders will be given a signal to enter the ring, no further signal will be given.
- Horses must be walked from the ring to the exercise area.
- Riders are not permitted to exercise more than one horse at a time (no ponying).
- Both hands may be used on reins. 5 second penalty for knocking down a barrel or pole.
- Handlers must release horses at in-gate.
- If a horse or rider (or both) fall during a run it is considered off course and thus eliminates them from that run.

ENTRIES: All entries must be on the regulation form provided. See top of entry form for mailing address and phone/fax numbers. Entries may be paid for with cash, cheque or VISA/MASTERCARD/AMEX. We can also accept e-transfers to hantscountyex@eastlink.ca. Please use 'bookings' as the password for the e-transfer.***ENTRIES WILL NOT BE ACCEPTED UNTIL PAID IN FULL. Entries can be mailed or faxed (902-798-2999). We do not accept photos of entries. If they are incomplete or illegible they won't be processed. *** **NOTE:** Show Committee reserves the right to refuse any entry. Entries are limited to the first 50 Open entries, 15 Youth, and 15 Novice. You will be placed on a waitlist after that.

REFUNDS: Will be made with Vet Certificate prior to the first class. To collect your refund a vet certificate must be given to the show office. A refund will be made on drug fee, stake fee and 75% of entry fee. **Before Closing Date** – Before closing date of entries, a full refund will be given. After Closing Date but before the start of the Show - Stall fees will not be refunded and the stall shall revert to the Exhibition for reassignment, without any compensation. NO STALL shall be assigned to any other party by anyone other than the Stall Manager. The Show Secretary must receive a WRITTEN CERTIFICATE OF HORSE OR PONY DISABILITY FROM A VET AT THE TIME OF CANCELLATION. The entry fees will be refunded, minus stall fees and the current office fee or 15% whichever is greater by cheque within 21 days of the completion of the show. Cancellations for any other reason are not entitled to a refund. Illness of the rider does not qualify for a refund. Substitutions: Upon submission of a written certificate of disability from a veterinarian, one horse may be substituted for an injured horse. All stall fees and entry fees will be applied to the new horse. The new entry will incur a \$20 substitution fee, but no late fee will be charged.

LIABILITY INSURANCE: Third-party Liability Insurance is required. *EXHIBITORS MUST INCLUDE WITH ENTRY A CURRENT LETTER* FROM THEIR INSURANCE COMPANY STATING THAT THEY HAVE ONE MILLION DOLLARS (MINIMUM) LIABILITY COVERAGE WHILE ATTENDING THE HANTS COUNTY EXHIBITION OR PROOF OF MEMBERSHIP IN NSEF.

CAMPING: First come first serve for services. You will be charged based on services provided. Please be aware that you may be required to go unserviced if we run out of serviced sites. If you wish to bring your trailer a day or two beforehand please email or call the office to arrange (hantscountyex@eastlink.ca / 902 798 0000)

PRIZE MONEY: Prize money will be mailed following the Exhibition.

DRUG TESTING FEE: There is a \$5.00 mandatory drug fee charged to all MBRA competitors

OPEN POLE BENDING

ENTRY FEE: \$65.00 FOR THE DIVISION PLUS \$30.00 STAKE FEE PER DIVISION = \$95.00 TOTAL FOR THE THREE CLASSES Open Pole Bending Prize Money: 28% 19% 15% 12% 10% 8% 5% 3%

L70 \$200.00 Pole Bending Stake - \$10. added stake L71 \$300.00 Pole Bending Stake - \$10. added stake L72 \$300.00 Pole Bending Stake - \$10. added stake

OPEN BARREL RACING

PLEASE NOTE: You must be a MEMBER OF THE MBRA to compete in these classes. Any horses competing in these classes may be subject to random drug testing in accordance with the rules and regulations of the MBRA.

ENTRY FEE: \$65.00 FOR THE DIVISION / Open Barrel Racing Prize Money: 24% 19% 16% 13% 8% 6% 5% 4% 3% 2%

L73 \$700.00 Barrels # 1 L74 \$700.00 Barrels # 2 L75 \$700.00 Barrels # 3

YOUTH GYMKHANA

Insurance and Entry Regulations are the same as Open Gymkhana. As per Pony Division Rules of MBRA. Riders must wear a hard hat.

ENTRY FEE: \$30.00 per division PRIZE MONEY: \$30 \$25 \$20 \$15 \$10

L76/L77 Youth Pole Bending L78/L79 Youth Barrel Racing

NOVICE GYMKHANA

PLEASE NOTE: Operating under MBRA rules. No points

ENTRY FEE: \$50.00 per division PRIZE MONEY: \$35 \$25 \$20 \$15 \$10

L80/L81/L82 Novice Pole Bending L83/L84/L85 Novice Barrel Racing

HCEX TOP 10 BARRELS & POLES The top ten fastest horse and rider combinations from the first two classes of the Hants County Exhibition face off. These will be a high energy run offs with the best of the best!

\$1000 DASH FOR CASH (BARRELS)

The top 10 barrels will place 1st to 5th. Competitors with the most points accumulated in Friday and Saturday's runs will be invited to compete. **Prize money:** 1st - \$350, 2nd - \$250, 3rd - \$200, 4th - \$100, 5th - \$100

\$1000 DASH FOR CASH (POLES)

The top 10 poles will place 1st to 5th. Competitors with the most points accumulated on Friday, Saturday and Sunday's runs will be invited to compete. **Prize money:** 1st - \$350, 2nd - \$250, 3rd - \$200, 4th - \$100, 5th - \$100

TENTATIVE SCHEDULE: (times to follow)

Friday Sept 17 (late afternoon start): Novice and Open Barrels; Novice and Open Poles

Saturday morning Sept 18: Novice and Open Barrels **Saturday afternoon Sept 18:** Novice and Open Poles

Saturday evening Sept 18: Youth, Barrels and Poles; Live Music; Top Tens

Sunday morning Sept 19: Youth, Novice and Open Barrels **Sunday afternoon Sept 19:** Youth, Novice and Open Poles

	diffe	Rider	, ,		
Horse's N	lame:	NSEF	NSEF #:		
Complete	Address: (if not complet	e prize money will not/cannot be ma	ailed)		
		Province	e: Postal Code:		
hone#:		E-mail:			
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(Credit card info will be blacked out once used)

STALL RELEASE FORM - 2021

The Windsor Agricultural Society and the Hants County Exhibition hereby agrees to provide a stall(s) to:

Name of Exhibitor

The stall(s) may be used for the following period:

Telephone Number _____

September 17 18 19

Address

This form is to be signed by the owner or agent. The person voluntarily signing this form agrees to indemnify, exonerate and hold harmless the Society, the Hants County Exhibition, their Committee, Officials, Employees and Agents from and against all damage and expenses arising out of any accident or occurrence causing injury (including death) or damage to property arising from use of the stall(s).

Stalls used are required to post their name and phone number where they may be reached in case of an emergency on the stall. Exhibitors staying in the Trailer Park are to state which lot they are in, a description of their trailer and license plate number.

Should stall user determine that the stall is not suitable for their animal they may ask for repairs. If repairs are not

satisfactory the exhibitor will be excused from exhibiting at the Show.

Date:

Signed by Exhibitor or Agent

STABLING FORM FOR PLACEMENT					
Please circle stall required	d: Straight	Regular Box			
Day & approximate time of arrival:					
Day & approximate time of departure:					
Please circle one:	Mare	Gelding	Stallion		
Horse's Name:			Height:		
Rider's Name:					
Phone Number:					

DAILY COVID-19 ATTESTATION AND AGREEMENT

By signing below, the Participant (named below) or the Participant's Guardian attests that the Participant:

- 1. Does not knowingly have COVID-19;
- 2. Is not experiencing any known symptoms of COVID-19, such as fever, cough, shortness of breath or malaise;
- 3. Has not travelled internationally during the past 14 days;
- 4. Has not frequented a COVID-19 high risk area in the Province during the last 14 days;
- 5. Has not, in the past 14 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is self-quarantining after returning to Canada; and
- 6. Has been following government recommended guidelines in respect of COVID-19, including practicing physical distancing.

Furthermore, by signing below, the Participant or the Participant's Guardian agrees that while attending or participating in the Organization's events or attending at the Organization's facilities, the Participant:

- 1. Will follow the laws, recommended guidelines, and protocols issued by the Government of the Province in respect of COVID-19, including practicing physical distancing, and will do so to the best of the Participant's ability while participating in the Organization's events or attending at the Organization's facilities;
- 2. Will follow the guidelines and protocols mandated by the Organization in respect of COVID-19;
- 3. Will, in the event that the Participant experiences any symptoms of illness such as a fever, cough, difficulty breathing, shortness of breath or malaise, immediately:
- a. inform a representative of the Organization; and
- b. depart from the event or facility.

FOR PARTICIPANTS WHO HAVE BEEN DIAGNOSED WITH COVID-19

By signing below, the Participant (named below) or the Participant or the Participant's Guardian attests that the Participant has been diagnosed with COVID-19, but been cleared as noncontagious by provincial or local public health authorities and has provided to the Organization, in conjunction with this COVID-19 ATTESTATION AND AGREEMENT, written confirmation from a medical doctor of the same.

Print Name:		Date of Birth:		
	the "Participant"		(mm/dd/yyyy)	
Print Name:				
	The "Guardian" (if Participant is a minor)			
Signature:		Date:		
	Participant or Guardian for minor		(mm/dd/yyyy)	

WAIVER OF LIABILITY FOR ALL CLAIMS AND RELEASE OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING. Completed waivers must be returned with registration or prior to attending the Organizer's event:**Hants County Exhibition** (the "**Event**"). This waiver does not affect accident and out-of-country travel insurance provided by the Organization where applicable.

By signing below, the Participant (named below) and/or the Participant's Guardian represents that the Participant:

- 1. Has not travelled internationally during the last 14 days;
- 2. Has not visited a COVID-19 high risk area, region or location in Canada during the last 14 days;
- 3. Does not knowingly have COVID-19;
- 4. Is not experiencing known symptoms of COVID-19, such as fever, cough, or shortness of breath, and if experiences such symptoms during the Event will immediately depart from the Event;
- 5. Has not, in the past 14 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is self-quarantining after returning to Canada; and
- 6. Follows government recommended guidelines in respect of COVID-19, including practicing physical distancing, and will do so to the best of the Participant's ability during the Event.
- 7. In addition, by signing below the Participant and/or the Participant's Guardian understands, acknowledges and assumes the inherent risks in participating in the Event, including, but not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; inadequate safety measures; circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officer, therapists, or volunteers (together, the "Organization"); negligence or omission of the Organization (collectively, the "Risks").

In consideration for allowing the Participant to participate in the Event, the Participant and/or the Participant's Guardian: (a) release, discharge and forever hold harmless the Organization from any and all liability for damages or loss arising as a result of the Risks of participation in or in connection with the Event; (b) waive any right to sue the Organization in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, demands, damages or losses of any kind that may arise as a result of the Risks of participation in or in connection with the Event, including without limitation the right to make a third party claim or claim over against the Organization arising from the same; and (c) freely assumes all risks associated with the Risks, anything incidental to the Risks, which may arise as a result of participation in or in connection with the Event. YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION.

I confirm that I have read and fully understand this waiver and release of liability. I sign this waiver and release of liability voluntarily without any inducement, assurance, or warranty being made to me.

Print Name:		Date of Birth:		
	the "Participant"	_	(mm/dd/yyyy)	
Print Name:				
	The "Guardian" (if Participant is a minor)	_		
Signature:		Date:		
	Participant or Guardian for minor	_	(mm/dd/yyyy)	

Facility Use Waiver: Windsor Agricultural Society the "organization"

WAIVER OF LIABILITY FOR ALL CLAIMS AND RELEASE OF LIABILITY PLEASE READ CAREFULLY BEFORE SIGNING.

Completed waivers must be returned prior to entry and use of the Organization's facilities. This waiver does not affect accident and out-of-country travel insurance provided by the Organization where applicable.

By signing below, the Participant (named below) and/or the Participant's Guardian understands and acknowledges, the risks, dangers, and hazards which are inherent on entering all lands, properties, facilities, structures, installations, vehicles or equipment owned, leased, operated or otherwise controlled by the Organization (the "Premises"), which risks include, but are not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; close proximity to or contact with surfaces, equipment, fixtures, or other objects that, despite the Organization's efforts, may be infected with COVID-19 or other communicable illnesses; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; tripping hazards; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; the negligent use of the Premises by others; inadequate safety measures or unsafe Premises; other circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officers, therapists, or volunteers (together, the "Releasees"); or negligence or omission of the Releasees (collectively, the "Risks").

In consideration for allowing the Participant to use the Premises, the Participant and/or the Participant's Guardian: (a) release, discharge and forever hold harmless the Releasees from any and all liability for damages or loss arising as a result of the Risks arising from entry into or use of the Premises; (b) waive any right to sue the Releasees in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, damages or losses of any kind that may arise as a result of the Risks or in connection with entry into or use of the Premises, including without limitation the right to make a third party claim or claim over against the Releasees arising from the same; and (c) freely assumes all risks associated with the Risks or anything incidental to the Risks, which may arise as a result of or in connection with use of the Premises. YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION AND RELEASEES.

I confirm that I have read and fully understand this waiver and release of liability. I sign this waiver and release of liability voluntarily without any inducement, assurance, or warranty being made to me.

Print Name:		Date of Birth:		
	the "Participant"	_	(mm/dd/yyyy)	
Print Name:	the "Guardian" (if Participant is a minor)	_		
	the Guardian (if Participant is a fillifor)			
Signature:		Date:		
	Participant or Guardian for minor		(mm/dd/yyyy)	