



Alamo Dressage Association Presents.....

Allison Brock and Jeremy Steinberg Symposium

Auditor Registration Information:

Where: San Antonio Rose Palace

When: May 18-19, 2019

Cost:

- Pre-Registration for both days - \$75. (This includes a ticket for the forum discussion/social event on Saturday evening. Value - \$20!)
- At-The-Door Registration - \$50/day
- Tickets for the Saturday evening forum discussion and social can be purchased at the door for an additional \$20.

Name: _____ ADA Member: _____

Email Address: _____

Home Address: _____

Release of Liability: I agree that I am participating voluntarily in the above clinic/symposium and am fully aware that horse sports and this clinic/symposium involve inherent dangerous risks of serious injury or death, and by participating I expressly assume any and all risk of injury or loss, including death to myself and my horse and I agree to indemnify and hold Alamo Dressage Association (ADA), San Antonio Rose Palace, and Janet Foy, their owners, agents, employees, and volunteers harmless from and against all claims including for any injury or loss suffered during or in connection with this clinic/symposium, whether or not such claim, injury or loss resulted directly or indirectly from the negligent acts or omissions of ADA San Antonio Rose Palace, and Janet Foy, their owners, agents, employees, or volunteers. I accept full responsibility for any and all medical expenses I incur as a result of any injury I or my horse incur while partaking in this competition. I will also be responsible for any and all medical expenses incurred on my or my horse's behalf by ADA including but not limited to ambulance fees, emergency room fees, doctor/vet fees, and hospital fees. I authorize ADA to authorize medical treatment on my behalf and on the behalf of my horse if I am unable to do so. I assume all responsibility and liability for any and all family members and/or guests I bring with me to San Antonio Rose Palace. I represent that I have the requisite training, coaching and abilities to safely ride in this clinic/symposium. If I am a parent or legal guardian of a junior (18 or under) participant, I consent to the child's participation and agree to all the above provisions and agree to assume all the obligation of this Release on the child's behalf. **WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE) AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.**

Signature, Legal Guardian (if rider is under 18 years in age) _____

Date _____

FMI: Tracy Augustine – 830.388.0451 or tracy_augustine@yahoo.com

****Auditor Pre-Registration forms must be received by April 18th.****

Mail completed registration form and check to:

Tracy Augustine

RE: Auditor Registration

1047 Persimmon Hill

Bulverde, Texas 78163