



# CIEF Membership Form

## MAIN APPLICANT DETAILS (Adult Competing Member, Parent or Guardian) Non-competing member is required for U/18

Name:		DOB: D/M/Y
P.O. Box:	Postcode:	Competing Member YES NO
Apartment/ House #:	Street:	District:
Home Phone #:	Cell Phone #:	Other Phone #:

Email address:

Nationality:	Drivers License Number:
	Passport Number:

Name of Employer:	Phone number:
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### I CAN HELP WITH.....

Show Management	Equine Welfare	Jump Crew
Fundraising/sponsorship	Timer	Show Announcer
Photography	Bake Sale	Other

### JUNIOR COMPETING MEMBER INFORMATION (Fill in only for members under 18)

Name:	DOB: D / M / Y
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Email address:

Nationality:

### PAYMENT & FEES

Competing Membership \$50.00 _____	Payment Type:
Non- Competing Membership \$10.00 _____	Check # _____ Bank _____
Total Enclosed: _____	Online via Butterfield, (please attach payment confirmation)

### CONSENT & WAIVER OF LIABILITY

By completing this form, I give my consent that my name, telephone and email will be given to the Ministry of Community Affairs, Youth And Sport and The Department of Children and Family Services, in order that the CIEF may comply with section 32a of the Children Law. I also understand that if I am, or my child is, a competing member, I must undergo child abuse reporting training conducted by The Department of Children and Family Services, if I have not already done so for another sport.

I hereby agree to release, indemnify and hold harmless the CIEF and its contractors, officers, agents, affiliates and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with participation in this membership and all related activities. I also hereby agree to release, indemnify and hold harmless the show management, show committee and members, officers, directors, agents, and volunteers from and against any and all loss, liability or damage arising from or because of, or in connection with participation in this membership or related activities. In addition, I give permission to CIEF to use any photographs or images taken of me or my children at CIEF events for publicity purposes for the CIEF.

Signature _____	Date: _____
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