



HALLOWEEN PARADE

HORSE REGISTRATION



PARTICIPANT INFORMATION

Name of Participant _____

Home Address _____

City _____ CELL Number _____

Email _____

Name of Contact Person for your Parade Unit _____

ENTRY INFORMATION

Will your entry have: Music Sound Effects

Entry Category: Mule & Rider Horse & Rider Youth Rider (17 and under)

PARADE INFORMATION

Deadline to register for parade will be no later than Friday, October 25th at 4pm.

Registration can be done at Flora Chamber of Commerce office at 223 W. Railroad St. (in The Flora Depot building) between the hours of 8:00 a.m. and 5:00 p.m.

****Horse and riders will need to be at Priceless IGA no later than 6pm, ready to LEAVE with the police escort at 6:15. If you miss the escort you cannot ride in the parade. This is for you and your horse's safety. You will be escorted as a group down to the old GSI (now Ed Lewis) grass area.****

Horses will be judged as a horse entry in the parade. You will receive your parade number at the old GSI staging area from your staging volunteer as they check you in.

Please be respectful of your staging area, and leave it in the same condition it was in when you arrived, including picking up any decorations, candy, trash, or anything left by any participating animals.

You also agree to not throw candy or any items from any animal, vehicle or float.

FLORA CHAMBER OF COMMERCE OR THE CITY OF FLORA IS NOT RESPONSIBLE FOR ACCIDENTS OR INJURIES INCURRED BY PARADE PARTICIPANTS. TO SELF OR EQUIPMENT.

Please refer to the back side of this form, for the "Release, Indemnification, and waiver of Liability" form.

Parent or Participant
Signature _____ Date: ____/____/____

(must be signed by a parent or guardian if participant is under the age of 18)

FOR OFFICE USE ONLY:

Parade card# _____

RELEASE, INDEMNIFICATION, AND WAIVER OF LIABILITY

WARNING

Under the Illinois Equine Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and the legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities.

1. I fully understand that equine riding and equine-related activities are very dangerous activities which no amount of care, caution, instruction nor expertise can eliminate. I wish to participate in these activities knowing that they are dangerous. I accept and assume all risks of injury or death and I represent and warrant that I have the authority to provide this Release.
2. To the fullest extent allowed by law, I, on behalf of myself, my family, my heirs, successors, and assigns and anyone claiming any interest through me or on my behalf, knowingly, intentionally, and voluntarily waive, release, indemnify, and agree to hold harmless the Flora Chamber of Commerce, the City of Flora, the County of Clay, businesses or property owners on which the event is being held, and/or the event's sponsors, as well as their officers, agents, volunteers, and employees (Releasees) from any such actions, suits, claims, damages, and liability (including attorney fees and costs) that I, my family, my heirs, successors, assigns, and anyone else claiming interest through me or on my behalf, may have for any loss, damage, injury, paralysis, or death to myself or any other person or property arising out of my participation in equine riding and related activities, whether such loss, damage, injury, paralysis or death results from the active or passive negligence of Releasees, I hold harmless and release the above named Releasees, from any and all claims and damages which may occur from participating in any and all activities sanctioned by the Flora Chamber of Commerce.
3. To the fullest extent allowed by law, I WAIVE ANY RIGHT TO PRESENT ANY LEGAL CLAIM OR SUIT against the Releasees, whether based on negligence, breach of contract, breach of warranty, strict product liability, dangerous condition of property, or any other legal theories.
4. This document is a legally binding contract, which supersedes any other agreement, or representation by or between the parties and which is intended to provide a comprehensive Release of liability and agreement not to sue the above named Releasees, their officers, agents, volunteers, and employees.
5. The undersigned further expressly agrees that the foregoing Release and Waiver of Liability, Covenant Not to Sue and Indemnity Agreement is intended to be as broad and inclusive as permitted by the law of the State of Illinois and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. The UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY, COVENANT NOT TO SUE AND INDEMNITY AGREEMENT and further agrees that no oral representation, statements or inducements apart from the foregoing written agreement have been made. The undersigned further agrees that should any dispute arise between the parties arising from or relating to this Release and Waiver of Liability, Covenant Not to Sue and Indemnity Agreement, that the undersigned agrees to have the matter submitted to arbitration and waives any right of trial by jury.
6. I am aware that this event is considered an "advertised equine event" under the Illinois Equine Infectious Anemia Control Act and that under this act all equidae more than 12 months of age participating in the event shall be accompanied by a negative official test for EIA conducted within 1 year of the event date. I am aware it is my responsibility, prior to participation in the event, to obtain a negative official test for EIA conducted within 1 year of the event date.

I HAVE READ THIS RELEASE AND AGREE TO ITS CONTENTS.

Parent or Participant

Signature _____

Date: ____ / ____ / ____

(must be signed by a parent or guardian if participant is under the age of 18)