



Liability, Medical & Financial Release

Youth's Name: (please print) _____

Liability Release

In consideration for representing the South Carolina Quarter Horse Association (SCQHYA) at the 2019 AQHYA World Championship Show in Oklahoma City, Oklahoma, I hereby grant permission for the aforesaid youth to participate/attend such show and/or judging competition. **I will**____ or **I will not**____(check one) be accompanying said youth to Oklahoma City. In either event, I will be responsible, in all respects, for his/her conduct and behavior while said youth is representing the South Carolina Quarter Horse Association. Further, the undersigned agrees to hold harmless and indemnify said association, its directors, officers, employees, youth advisors, and agents for any liabilities or losses that may arise as a result of damages, injury, or death to the youth or the youth's horse, or his/her property incurred while said youth is representing the South Carolina Quarter Horse Association at such event.

Medical Release

If, for any reason, the undersigned is not available to do so, I, the parent or legal guardian of this youth, do hereby give my permission to take said youth to a doctor or hospital and do hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility for all medical bills, if any. Further, should it be necessary for the youth to return home due to medical reasons, disciplinary action or otherwise, I hereby assume all transportation costs.

Financial Release

The South Carolina Quarter Horse Association may pay for stall and entry fees to the AQHYA World Show for all South Carolina World Show Team Members that have attended at least 2 AQHYA meetings between January 1 thru July 1 of current year. SCQHYA will also pay for all stall decorations, t-shirts, hospitality room refreshments, etc. Additionally, SCQHYA may choose to give a stipend to each team member. Further, other than the death of the horse entered, if, for any reason, a youth and/or his/her horse fails to attend AQHYA World Show after entries have been made, I, the parent or legal guardian of the aforesaid youth agree to reimburse the South Carolina Quarter Horse Association for all entry fees and stall fees. Extenuating circumstances may be appealed to the SCQHA Executive Committee.

Parent/Guardian

I, the parent or legal guardian of _____, have read and agree to the above liability, medical, and financial release.

Print Name: Parent or legal guardian

Email:

Signature: Parent or legal guardian

____/____/____
Date:

Phone: Cell

●This form along with the AQHYA release form must be signed and returned to the South Carolina Youth Advisor by June 18, 2019. If both forms and all your entry forms along with payment (if due) are not received by the above deadline, you will not be eligible to compete at the 2019 Youth World Show●