

LIABILITY WAIVER DUE PRIOR TO SHOW OF EVENT PARTICIPATION

**2021 HORSE SHOW SEASON
CANFIELD FAIRGROUNDS WAIVER OF LIABILITY**

I/We. The parents' or guardians' of Equine Youth member _____ do irrevocably hereby release and hold harmless the Mahoning County Agricultural Society, its directors, officers, employees, and agents, their heirs and assignees and the advisors of the _____ Equine Club, from any damages, costs or claims of any kind or nature for damages arising out of or related to an accident or injury to my/our child named above, his or her animal(s) and or personal belongings while participating in activities at the Canfield Fairgrounds.

The undersigned further agrees to defend, indemnify and hold the Mahoning County Agricultural Society free and harmless from any and all costs, expenses and attorney fees which may in any manner arise as a result of my/our child's participation.

A copy of this Waiver of Liability will be kept on file at the Canfield Fair Office, the MSHC and by the first Equine Club advisor _____ during the year of 2021.

DATE: _____

SIGNED: _____
Parent or Guardian

SIGNED: _____
Parent or Guardian

In signing this, I/We realize and have been advised that my/or approval by Signature is required before my/our child may take his/her horse/pony into the horse ring at the Canfield Fairgrounds.

I/We the parents' or guardians' of _____ have a current health insurance policy covering my/our child with the following insurance company.

Company Name

Address

City/State/Zip

Phone

SIGNED: _____
Parent or Guardian

SIGNED: _____
Parent or Guardian

VERIFIED BY: _____
Equine Club Advisor

**CORONAVIRUS/COVID-19 WAIVER
ACKNOWLEDGEMENT AND AGREEMENT**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing.

The Mahoning County Agricultural Society ("MCAS") has implemented preventative measures to reduce the spread of COVID-19; however, MCAS cannot guarantee that you will not become infected with COVID-19. Further, participating in events on MCAS property may increase your risk of contracting COVID-19.

In consideration of your opportunity to participate in events on MCAS property, by your signature below, you, on behalf of your child, acknowledge the contagious nature of COVID-19 and agree that you are voluntarily assuming the risk that you/they may be exposed to or infected by COVID-19. By participating, you understand that, the exposure to infection may cause personal injury, illness, permanent disability, and death.

You voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to yourself, or your child, including or arising from illness, damage, loss, claim, liability, or expenses of any kind that may occur as a result of your child's participation. You irrevocably release, covenant not to sue, discharge, and hold harmless MCAS its board members, officers, employees, agents, and representatives from any and all claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to your child's participation in events on MCAS property.

You further agree to notify MCAS if you or your child becomes ill with COVID-19 during or after participation as soon as possible. The provisions of this document shall be binding upon your successors, heirs, next of kin and estate.

You also affirm and agree to the following:

- Neither you, your child, or anyone in your immediate family are currently suffering from a fever, dry cough, fatigue or difficulty in breathing. I agree to will notify MCAS immediately if such individuals begin to experience such symptoms.
- Neither you, your child, or any of my household members have been diagnosed with COVID-19 within the past 30 days.
- Neither I, my child nor immediate family members have knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.
- Neither I nor my child have traveled outside of the country or to any city considered to be a "hot spot" for COVID-19 infections within the past 30-days.

Signature

Print Name

Participating child's name

Date