



Cornwall Trail Riding at Guindon Park 2010 Membership Form

Membership and Day Passes
 Cornwall Aquatic Centre
 100 Water Street East
 Cornwall, Ontario K6H 6G4
 Tel: (613) 933-3586
 E-mail: ltaillon@cornwall.ca

Trail Riding at Guindon Park
 Vincent Massey Drive West
 Cornwall, Ontario
 (Just west of Power Dam Drive)
 Tel: 613-933-3586
 E-mail: ltaillon@cornwall.ca

OFFICE USE ONLY:

Cash OW Cheque
 Other _____
 Amount _____
 Date _____
 Signed _____
 Tag(s) # _____

The Corporation of the City of Cornwall invites you to join us and lend your financial support to help maintain the riding trails in the City of Cornwall.

In order to be eligible for a Cornwall Trail Riding Pass at Guindon Park, you must provide our office with a photocopy of your valid Ontario Equestrian Federation (OEF) membership card. If you do not have a current membership in this organization, we will require a copy of your certificate of insurance in a minimum amount of \$2 million dollars. Photocopies can be taken at the Cornwall Aquatic Centre.

FEES

Please Check Box

\$40.00 + taxes	Seasonal Individual Membership Trail Pass April - October 2010	
\$70.00 + taxes	Seasonal Family Membership Trail Pass April - October 2010 <i>(2 Adults and all children under 18 at same address)</i>	
\$10.00/per day + taxes	Daily Individual Trail Pass	
\$25.00/per day + taxes	Daily Family Trail Pass <i>(2 adults and all children under 18 at same address)</i>	

The cost of one Daily Individual Trail Pass and a Daily Family Trail Pass can be applied to the cost of an Seasonal Individual Membership Trail Pass or an Seasonal Family Membership Trail Pass. Payment for the transaction must take place at the Cornwall Aquatic Centre.

Children under the age of 18 are required to wear

- A helmet on all trails.
- Hard-soled footwear with a heel of no less than 1.5 cm.
- Long pants or proper riding chaps.

Types of Membership/Passes available:

- Seasonal Individual Membership Trail Pass
- Seasonal Family Membership Trail Pass
- Individual Day Trail Pass
- Family Day Trail Pass

Individual Membership Please Print:

Adult # 1 _____ DOB ____d ____m ____yr
 Address _____
 City _____ Province _____ Postal Code _____
 Home Phone _____ Business Phone _____ Email address _____
 EOF Membership Number: _____ **OR**
 Liability Insurance Company _____ Policy # _____

Family Membership Information:

Adult # 2 _____ DOB ____d ____m ____yr
 Child # 1 _____ DOB ____d ____m ____yr
 Child #2 _____ DOB ____d ____m ____yr
 Child #3 _____ DOB ____d ____m ____yr

I agree to all stipulations in the agreement

Signature _____ Date _____

Release and Indemnity Agreement

Hold Harmless and Indemnification Clause

The Organization/User Group hereby shall Hold Harmless and shall fully Indemnify the Corporation of the City of Cornwall, its elected officials, employees and agents and its successors and assigns, from and against all actions, claims, and demands whatsoever which may be brought against or made upon the City of Cornwall and against all loss , liability, judgments, claims, costs, demands or expenses which the City of Cornwall may sustain, suffer or be put to, resulting from or arising out of the Organization/User Group’s failure to exercise reasonable care, skill or diligence in the performance or rendering of any work or service required hereunder to be performed or rendered by the Organization/User Group, its agents, servants, or employees.

BY SIGNING THIS AGREEMENT, I HEREBY AGREE TO THE ABOVE RELEASE AND INDEMNITY.

I, _____, hereby certify that I have read and accept the User Regulations of the Membership/Day Pass, and I agree to its terms and conditions.

Applicant Signature

Date of Application

Parent/Guardian Signature if applicant under the age of 18: _____