

Consent form – conditions of entry.

ANY PARTICIPANTS UNDER 18 CAN HAVE PARENTS FILL OUT CONSENT FORM AND SIGN FOR THEM.

PARTICIPANTS NAME: _____

AGE: _____

(If applicable)

TELEPHONE: _____

EMAIL: _____

Please tick box to agree to receiving any promotional marketing via email ____

If participants are under 18 years old, please additionally provide personal information and contact information of a parent/guardian who is over the age of 18.

GUARDIANS NAME: _____

TELEPHONE: _____

EMAIL: _____

By signing this consent form you are accepting the fact that the participants may appear in media photography and video coverage that may include any printed, electronic, and digital material used for the promotion of hobby horse adventures future events or any other type of promotional marketing. Participants hold no rights to object to or demand any payment in respect of their inclusion in any such marketing/coverage.

Participants will be provided with any additional waivers required for the unrestricted lawful use of any coverage (if any) without the request or demand for payment or imposing any other type of conditions.

We (or potentially a third party) may create images, audio footage and/or audio-visual footage of visitors attending the events. We (or a third party) own all rights to images or video footage taken at the events and we shall be entitled to use the same for a purpose of: promoting Hobby Horse Adventures and its commercial partners; and any other type of commercial activity, provided that such use does not intentionally harm the reputation of the relevant individual whose image is used and subject to any right a visitor may have to object to the foregoing as set out in our privacy policy.

By signing this form participants are acknowledging that the participants do not have any physical limitations or medical ailments that would limit or prevent their abilities whilst participating within this event. You are agreeing and acknowledging the fact that Hobby Horse Adventures are not liable for any type of injuries or accidents that may occur at the event in the event of potential risk of injury whilst participating.

DATE: _____

PRINTED NAME: _____

(If applicable)

PARTICIPANTS SIGNATURE: _____

IF PARTICIPANT IS UNDER 18 PLEASE PROVIDE PARENTAL SIGNATURE AND NAME.

PARENT/GUARDIAN SIGNATURE: _____

PARENT/GUARDIAN PRINTED NAME: _____