



2018 RV TRAILER APPLICATION

Date: _____

Arrival Date: _____

Show Name: _____

Exhibitor Name: _____

Horse Name: _____

Trainer Name: _____

Email: _____

Cell: _____

Trailer Specifications: Year: _____ Make: _____ Model: _____

RV License Number: _____

Size of RV Trailer

Length of Unit: _____ feet Slide Out (circle) YES NO

RV Space Fee (per show) \$500

(Includes water, two pump-out services & 30 amps of electricity)

Special Requests: (will be considered, but not guaranteed)

NOTE: RV cancellations must be made 7 days prior to reservation or a \$200 fee will be charged for late cancellation.

Payment must be received in order to guarantee an RV space.

Please complete this section if paying by credit card:

Name on card: _____ Billing Address _____

Card number: _____ Exp. _____ CVV: _____

I agree to and have read all terms & conditions on page 2 _____

Due to high demand for RV parking, spaces will not be reserved without a completed RV application form. All RV space reservations will be accepted on a first reserved, first served basis. RV trailer spaces will be assigned by Blenheim EquiSports staff. If space fills up, a waiting list will be established but with no guarantee of space. RV Trailers may arrive at the facility on the Monday before the horse show begins and must depart on Sunday at conclusion of the horse show. NO EXCEPTIONS!

GENERAL RELEASE OF CLAIMS

PLEASE READ CAREFULLY. THIS RELEASE LIMITS YOUR RIGHTS.

I, the undersigned, am voluntarily entering the premises at Rancho Mission Viejo Riding Park and/or ACE Equestrian and/or Del Mar Horse Park and/or South Point Equestrian Center (the "Premises"). I acknowledge and fully understand that I will be engaging in activities that involve the risk of serious bodily injury, including, but not limited to, permanent disability and death; the risk of severe social and economic loss; and the risk of damage to or loss of personal property including, but not limited to any vehicle I may park at or near the Premises. I understand that this risk of injury or loss might result from my own actions, inactions, or negligence, the actions, inactions, or negligence of others, or the condition of the Premises or of any equipment used on the Premises. I further understand that there may be other risks not known to me or not reasonably foreseeable at this time. I also understand that this acknowledgment and release covers claims and liabilities caused by any acts or failures to act by Blenheim EquiSports Management Company, LLC., its officers, managers, employees, owners, representatives and agents, ACE Equestrian, LLC, its officers, managers, employees, owners, representatives and agents, Blenheim Facility Management, LLC, its officers, managers, employees, owners, representatives and agents, South Point Equestrian Center, its officers, managers, employees, owners, representatives and agents and the City of San Juan Capistrano, its employees, representatives and agents, subsidiary affiliated or associated company, corporations, entities or organizations as may now or hereafter be constituted, that own, are related to or manage the property owned by such entities, (collectively, the "Released Parties"), including, but not limited to, mistake, negligence, or failure to supervise by any of the Released Parties.

I understand and acknowledge that I can be dismissed from the Premises for any reason. In consideration of being granted permission to enter the Premises, I assume full responsibility for all risk of bodily injury or property damage that might result from my participation in any activity held on the Premises.

ON BEHALF OF MYSELF, MY HEIRS, SUCCESSORS IN INTEREST, GUARDIANS, LEGAL REPRESENTATIVES AND ASSIGNS, I HEREBY RELEASE AND FOREVER DISCHARGE THE RELEASED PARTIES, JOINTLY AND SEVERALLY, FROM ALL CLAIMS, ACTIONS, DEMANDS, RIGHTS, CAUSES OF ACTION AND LIABILITIES, IN LAW OR IN EQUITY, WHETHER MY OWN OR DERIVATIVE CLAIMS, BASED UPON ANY BODILY INJURY OR DISABILITY, ILLNESS OR DISEASE, DEATH, FINANCIAL LOSS, PROPERTY LOSS, DAMAGE, DESTRUCTION OR OTHER HARM OF WHATEVER NATURE, WHETHER FORESEEN OR UNFORESEEN, THAT MAY BE SUSTAINED OR SUFFERED BY ME OR BY ANY OTHER PERSON AS A DIRECT OR INDIRECT CONSEQUENCE OF MY PRESENCE ON THE PREMISES, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERWISE.

I agree to indemnify, defend, and hold harmless from and against, and I agree not to sue each of the Released Parties regarding any and all claims, suits, demands, liabilities, damages, losses, costs and expenses, including but not limited to attorney's fees, arising from or in connection with the injury, illness or death of any person or the damage, destruction or loss of any of my or others' property which might result, directly or indirectly, from my presence on the Premises.

I realize that this waiver refers to and covers events that may take place after the signing of this document, and that the exact nature of any injury or loss I may suffer because of my presence on the Premises may not be foreseeable. I realize that the extent of loss possible includes serious bodily injury or even death, and total destruction or loss of any property I may leave at the Premises or have with me on the Premises. Knowing the possible extent of damages or injuries I may suffer, I hereby expressly waive any claim under Section 1542 of the California Civil Code, relating to the release of unknown claims, which Section reads as follows:

"A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor."

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. PRIOR TO SIGNING THIS AGREEMENT, I HAVE HAD AN OPPORTUNITY TO READ CAREFULLY THE ENTIRE AGREEMENT AND TO HAVE ANY QUESTIONS ANSWERED TO MY SATISFACTION.

PLEASE COMPLETE ALL OF THE FOLLOWING:

1. Name: _____

2. Emergency contact: Name: _____ Phone: _____

I have read the above and understand and agree to its terms.

Signature: _____ Date: _____

If the undersigned is under eighteen (18) years old, the undersigned parent or legal guardian represents and warrants that he/she has completely read and understands this Release and its terms. The undersigned parent or legal guardian makes and enters into each and every representation, waiver, release and indemnity described above on behalf of himself/herself, the minor and any other parent or legal guardian.

Signature: _____ Date: _____

Print Name : _____