



**EASTERN ONTARIO PLEASURE DRIVING SOCIETY INC.**  
**MEMBERSHIP APPLICATION and WAIVER FORM (2 pages)**  
**For Year 2018**

**RENEWAL:**  **NEW:**  effective from January 1, 2018 to December 31, 2018

**Membership Fee is: \$30.00 (individual) \$40.00 (family membership)**

**OE/FEQ Membership number (if applicable):**  **Expiry Date:**

*(The EOPDS encourages active members to join the Ontario Equestrian (OE – call toll-free 1-877-441-7112) or the Quebec Equestrian Federation (FEQ – call toll-free 1-866-575-0515). Please provide a photocopy of front and back of card with membership. Both provide liability insurance associated with membership.)*

**NAME:** \_\_\_\_\_

**Name of Spouse(if applicable):** \_\_\_\_\_

**Telephone Numbers: - Residence:** \_\_\_\_\_

**and/or Work:** \_\_\_\_\_ **and/or Cell:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**I/We would like to receive the EOPDS newsletter by -**

**Email:**  **or Mail (\$10.00 mailing fee):**

**I (We) are interested in the following aspects of Driving:**

- Pleasure Driving [ ]
- Recreational Driving [ ]
- Social Drives [ ]
- Clinics [ ]
- Shows [ ]
- CDEs [ ]
- Volunteering at Event [ ]
- Serving on Committee [ ]

**I (We) Drive:**

- Single Pony [ ]
- Single Horse [ ]
- VSE [ ]
- Pair Ponies [ ]
- Pair Horses [ ]
- Pair VSEs [ ]
- Multiples [ ]
- Other [ ]

*Before participating in driving events with horses, proof of current Liability Insurance (photocopy) for \$1,000,000.00 to be forwarded to the Treasurer with your membership application. Include Expiry date of Policy. I (We) agree that, in consideration of acceptance of my membership in the Eastern Ontario Pleasure Driving Society and on payment of the membership fee, without qualification to waive any and all claims for legal liability arising out of the operation of this incorporated Society as against the Society and/or its members that may come into existence during the period of my membership in the Society during the Calendar year 20 \_\_\_\_\_ Further, I (We) agree to be bound by the Bylaws and Rules of the Society.*

**IMPORTANT – Publicity Agreement:** I/We hereby give permission to EOPDS to use my/our Name(s) and/or Photographs(s) in newsletters, articles, media releases, advertisements, brochures or reports they produce. YES  NO

**Important Privacy Note**

EOPDS is a not-for-profit association established to promote the association of people with an interest in vintage vehicles and in pleasure, recreational or combined driving, emphasizing family involvement in meetings and driving activities. With this in mind and the requirements of the Personal Information Protection and Electronic Documents Act (PIPEDA). The Society will not rent, lease or sell the Society's membership list and will protect your information from unauthorized access or use. We highly value the membership's privacy. The collection of the membership information is used to administer the membership so that the Society may send newsletters, announcements of carriage driving interest, plan and inform the membership of upcoming driving events or interests and as always to see if members are interested in participating in said events.

**Signature (Member):** \_\_\_\_\_ **Date:** \_\_\_\_\_ 20 \_\_\_\_\_

**Signature(Spouse)(if applicable):** \_\_\_\_\_

For family membership, list drivers (indicate youth drivers age 19 and under with an \*):

\_\_\_\_\_  
 \_\_\_\_\_

Please mail the following completed documents: **EOPDS membership application, Waiver and Release of Liability form, photocopy of proof of insurance or a photocopy of EO or FEQ card (front and back)** if an active member, and **cheque payable to EOPDS** to:

**Barry Beach, EOPDS Treasurer, 1894 March Road, Kanata, Ontario K2W 0G4**

*(Have you remembered to fill out the waiver form)*



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**Waiver and Release of Liability**

**Name:** \_\_\_\_\_

**OE/FEQ number:** (if applicable) \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_

**Spouse's Name:**  
(if applicable) \_\_\_\_\_

**Spouse's OE/FEQ number:**  
(if applicable) \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**– This document will affect your legal rights and liabilities –  
Please read carefully.**

*I acknowledge that the sport of driving is a high risk sport and that I am participating at my own risk and in full knowledge of the hazards and potential hazards which are inherent in this sport. I further acknowledge and absolve the Eastern Ontario Pleasure Driving Society, Organizing Committee, Provincial Associations, Equine Canada and their officials, volunteers, Officers, Directors, agents, representatives and employees and the owners of any of the properties where these functions are held from all responsibility, liability or claims of an nature and kind which I may have arising from my participation in this activity, including but not limited to bodily injury or death to myself , my groom and/or navigator, my horse(s) and damage to property arising from any cause whatever, including the negligence of one or more individuals and organizations referred to herein. I hereby declare that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assign.*

**Signature of Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_ 20 \_\_\_\_\_

**Signature of Spouse:** (if applicable) \_\_\_\_\_ **Date:** \_\_\_\_\_ 20 \_\_\_\_\_

*If a member is under nineteen (19) years, the parents/guardians must also sign below.*

*I/We acknowledge as Parents/Guardians of youth member/s named below:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*that I/We have read and fully understand and agree to the conditions stated herein.*

**Signatures of Parents/Guardians:** \_\_\_\_\_ **Date:** \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_ 20 \_\_\_\_\_