



OHIO VALLEY ARABIAN HORSE ASSOCIATION

APPLICATION FOR C.O.M.M.I.T. SCHOLARSHIP PROGRAM

(Committing Our Membership to Mentoring Interested Teens)

The **Ohio Valley Arabian Horse Association** is committed to formulating educational and publicity programs in the interest of the Arabian, half arabian and anglo-arabian horse and owner. We are seeking applicants who are not current members of AHA or whose personal circumstances have not permitted a 2012 membership. Therefore, we appreciate your interest and the opportunity to review your application!

Applicants awarded a COMMIT scholarship must (A) attend two Sizzler meetings; (B) volunteer to work a minimum of four hours at a club fundraiser either (i) the Preble County Tack Sale (although before deadline) or (ii) OVAHA booth, Troy Strawberry Festival; and (C) volunteer to work at the Summer Sizzler. Recipients will learn horse show management skills, profit/loss issues, contract review, educational and publicity management and will be personally mentored by an OVAHA member.

OVAHA will provide a youth membership to OVAHA, a youth membership to AHA and a youth membership to USEF. In addition, recipient will receive a free stall, two class entries, all office fees, etc. to Summer Sizzler I and II. (Over \$250 value!!)

Application deadline is **February 29, 2012**.

NAME: _____ DATE OF BIRTH: _____
Must not have attained 18 years of age prior to 12/31/12

ADDRESS: _____

COUNTY OF RESIDENCE: _____

HOME AND CELLULAR TELEPHONE NUMBERS: _____

RELEASE AND CONSENT TO PARTICIPATION:

This equine activity liability release, waiver of right to sue and assumption of all risks agreement is hereby given this ____ day of February, 2012 by the undersigned to Ohio Valley Arabian Horse Association (OVAHA) and mentor, equine activity sponsors and upon which an equine activity to which this agreement relates is conducted and each board member, officer, agent, employee, heir, personal representative, successor and assign of the OVAHA and provide as follows. In consideration for the opportunities provided by OVAHA and mentor to the undersigned and any minor in whose behalf the undersigned signs this agreement, the participant, including any minor participant for whom he signs this agreement, hereby agrees as follows: This agreement is given in part under the Ohio Equine Activity Liability Act and shall have the same meaning herein and the Act is hereby incorporated in this Agreement by reference. This agreement shall be so construed as to provide to OVAHA and mentor the fullest protection of a release, waiver of right to sue and assumption of all risks that is afforded to OVAHA and mentor by the Act and by general law. The undersigned hereby acknowledges that (s)he has full and complete notice and understanding of the Act and all risks inherent in equine activities that may cause, contribute to or result in the death or personal injury of the participant or damage to the participant's property. The participant hereby releases and waives all rights which (s)he may have or hereafter have against OVAHA and/or mentor for death, personal injury or property damage which is in any way associated with the risks, further waives his right to sue or to bring any action against OVAHA and/or mentor in connection therewith and agrees to indemnify and defend OVAHA and mentor and to hold them harmless against any such suit or action; including reimbursement of legal fees associated with the defense of any claim and expressly assumes all risks and dangers of death, personal injury and property damage that are in any way associated with the risks. The participant hereby authorizes and consents to any emergency medical care that may at the time appear reasonably appropriate under the circumstances as a result of injury or sickness caused by or incurred in the course of equine activity. This agreement shall remain valid and in full force and effect from and after the date below at the signature of the undersigned until expressly revoked by the undersigned in a written notice. The undersigned hereby warrants and represents the (s)he is in fact the parent or legal guardian of minor.

X

Print Residential Parent/Custodian Name:

Application should be transmitted electronically to Sherri Lewis at lewisj@co.warren.oh.us . Executed original must be sent by ordinary mail, postmarked not later than February 29, 2012 to OVAHA; c/o Sherri Lewis, President; 2750 Beckett Street; Lebanon, Ohio 45036.