



2024 YOUTH WAIVER FORM

152nd ANNUAL CHILLIWACK FAIR

August 9 – 11, 2024

7590 Lickman Road, Chilliwack, BC V2R 4A7
Phone: 604-824-8191 www.chilliwackfair.com

To be completed for all Young Farmer and Jersey Youth Showmanship participants

Name of Child _____ Age _____

Class Entered _____

Address _____

Phone _____ Email _____

WAIVER OF CLAIM "I, _____, being the parent or legal guardian of _____, (my child) consent to his/her participation in the _____ show at the Chilliwack Fair." I acknowledge that this event is potentially dangerous and involves risk of harm to the person and property of my child. In consideration of my child being accepted in the foregoing activity, I accept such risk on behalf of myself and my child absolutely, and agree that neither the Chilliwack and District Agricultural Society, its directors and officers, the management, or staff, shall be liable for any damage or injury sustained by my child while engaged in this activity, or as a result of my child being on the Exhibition grounds for such activity.

Signature of Parent or Guardian

Date