



LYONS PRODUCTION SERVICES EVENTS CENTRE PROFESSIONAL PERMIT APPLICATION

Please make cheques out to Teepee Creek Stampede Association

APPLICANT/COMPANY INFORMATION

Company/Applicant Name: _____

Contact name (if different than above): _____

WCB/Insurance policy company & number: _____

Email Address: _____ Phone #: _____

Mailing Address: _____

Profession: Farrier Equine Dentist Veterinarian Equine Chiropractor/Therapist
 Other:

CONDITIONS

Please call or text 780-380-1917 to use the Lyons Production Services Events Centre for your professional services.

Any professional that does not remit payment or misuses the facility will be banned from using the facility.

Professionals must only use lean-to to provide services and only during designated open riding times.

Professionals and their clients must not interfere with the activities of other users in the Lyons Production Services Events Centre or harass other users using the facility.

Professionals must pay for use of the Lyons Production Services Events Centre at the rate of \$10 per animal.

Payment may be made via: cash or cheque in the drop box located on the north end of the lean-to, or etransfer to accounts@tpstampede.ca using password LPSEC1.

Please check to receive a receipt via email.

RELEASE WAIVER

I understand that there can be danger and risk involved in equestrian sports and activities and using a public facility. I HEARBY RELEASE AND FOREVER DISCHARGE the Lyons Production Services Events Centre along with their staff and volunteers of and from any actions, causes of actions, suit demands, claims and proceedings of any kind whatsoever, for any damages, loss or injury suffered (whether to myself or to my property) in connection with my use of any of the facilities noted on this agreement, no matter how such damages, loss or injury might be caused. I also understand that any mistreatment of animals will result in the renter being blacklisted and being reported to the SPCA.

Applicant Name

Applicant Signature

Date

TP Rep. Name

TP Rep. Signature

Date

OFFICE USE ONLY

Invoice #

Permit #