



**Manitoba
Horse Council**

COVID-19 Event Plan and Document Archive

Dates of Event (YYYY / MM / DD) _____ to _____

Name of Event _____ Hosting Facility _____

Location _____

Club / Association _____

Name	Name	Email Address	Phone #
Club / Association President			
COVID Officer at the event			
Event Manager / Organizer			
Hosting Facility contact			

Please indicate copies of completed documents being submitted for Archive. Can be digital or hard copy

Initial COVID event plan

Final documents to be submitted within two weeks of the event

Facility Waiver

Event Organisers' Waiver

Participants Waivers

I have scrutinised all the attached documents for omissions and errors and I confirm that these documents are complete and correspond to our attendance records for the above event. I understand that Manitoba Horse Council will retain these records on behalf of the Club or Association for a period of three years from the date of the event, and will make available back to the Club or Association if required for investigation. The documents will be destroyed after the three year period and without notice to the Club or Association.

(Signed by one of the three position holders below.)

Signed: _____ Date: (YYYY / MM / DD) _____

Please Print Name _____

Responsibility:

President COVID representative at this event Event Manager