

ACKNOWLEDGEMENT OF RISK AND RELEASE OF LIABILITY – EQUINE ACTIVITIES

Every Person must READ and UNDERSTAND this form before participating in EQUINE ACTIVITIES

Participants Name: _____ DOB: __/ __/____

Participant's Address: _____

Fo: ADK Stables, their directors, employees, officers, volunteers, business operators and owners (hereinafter collectively referred to as "ADK Stables"). Please read each item below and indicate your understanding by initialling in he space provided:

1. I **UNDERSTAND** that there are inherent **DANGERS**, **HAZARDS** and **RISKS** (the "Risks") associated with Equine Activities and injuries resulting from these Risks are common occurrence.

2. **I ACKNOWLEDGE** that the inherent Risks of Equine Activities mean those DANGEROUS conditions which are an integral part of Equine Activities, **including but not limited to:**

- The propensity of any horse to behave in ways that might result in injury, harm or death to persons on o around them and to potentially collide with, bite or kick other animals, people or objects.
- The unpredictability of a horse's reaction to such things as sounds, sudden movement, tremors, vibrations unfamiliar objects, persons or other animals and hazards such as subsurface objects.
- The potential for other participant(s) to act in a negligent manner that might contribute to injury to themselves or others, such as failing to act within their ability or to maintain control over any horse.

3. **I FREELY ACCEPT and FULLY ASSUME all RESPONSIBILITY** for the inherent Risks and the possibility o person injury, death, property damage or loss resulting from my participation in Equine Activities.

4. I ACKNOWLEDGE that it remains my Sole Responsibility to act in such a manner as to be responsible fo ny own safety and to participate in Equine Activities Within My Own Limits.

5. In addition to consideration given for me to participate in Equine Activities, I and my heirs, executors administrators and assigns (collectively my "Legal Representatives") agree:

- To Waive all Claims that I or the participant might have against ADK Stables; and
- To Release ADK Stables from ANY and ALL LIABILITY for any loss, damages, injury or expense that I o my Legal Representatives might suffer as a result of the participation due to any cause whatsoever including any NEGLIGENCE on the part of ADK Stables; and
- **To HOLD HARMLESS and INDEMNIFY ADK Stables** from any and all liability for property damage o personal injury to any third party which might result from participating in Equine Activities.

For **Participants Under 18 Years of Age**, this form must be initialled and signed by a Parent or Legal Guardian and:

6. I CERTIFY that I am the Parent and/or Legal Guardian of the Participant and I am executing this form or behalf of the Participant in my capacity as Parent and/or Legal Guardian and with the intent that this form be binding on me and the Participant for all legal purposes.

certify that I have read this form and, as indicated by my initials above, that I understand this form. I know that by signing this form I am waiving certain legal rights that I or my Legal Representatives might have against ADK Stables.