

Print Date: \_\_\_\_\_ Print Last Name: \_\_\_\_\_

### RELEASE OF LIABILITY

I acknowledge that equestrian activities, including but not limited to horse handling, care, and horseback riding, are ultra-hazardous and inherently dangerous activities which carry risks of serious personal injury and/or death, and that failure to wear protective headgear at all times increases the likelihood thereof.

I herewith acknowledge that I knowingly assume any and all risks, whether general or specific, and whether known or unknown to me, foreseeable or unforeseeable, regarding any and all equestrian activity including, but not limited to, horse handling, care and horseback riding, both as to myself and my minor children and guests, if any, including as to the failure of myself or my children and guests to wear protective headgear at all times.

I herewith waive, release, and discharge Leslie Hardy and Rancho de Los Amigos, \_\_\_\_\_, their agents, employees, assigns, executors, tenants, and representatives (hereinafter "Releasees") from any and all claims for any and all injuries or damages whatsoever sustained by me on or off the premises of Releasees by reason of fire, theft, equine health, or any act, omission, or want of ordinary care, whether or not such injury or damage is occasioned during my participation in any equestrian activity of any kind or nature or in any event organized or sponsored upon the premises of Releasees, and whether or not I avail myself of protective headgear. This agreement shall be binding upon my executors, heirs, and assigns.

I agree that I will defend, indemnify, and hold harmless Releasees against any and all claims, demands, and causes of action, including court costs and attorney's fees, arising from any proceeding or lawsuit brought or prosecuted for my benefit or the benefit of my heirs and/or guests.

I acknowledge that I have read this Release of Liability and know and understand its contents and accept its effect.

### Please print clearly!

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I, the undersigned, as parent or legal guardian of \_\_\_\_\_, agree that the terms and conditions of this Release of Liability shall be binding as to any injury or damage sustained by said minor child, his/her animals, and/or property arising out of his/her participation or failure to wear protective headgear in any equestrian activity as aforesaid.

Name of boarder or trainer riding with:

\_\_\_\_\_