## ACKNOWLEDGMENT of RISK and RELEASE of LIABILITY

## "FOR PARTICIPANTS 19 OR OLDER"

PLEASE PRINT CLEARLY

	CIPANT'S NAME: DATE OF BIRTH:
ADDRE CITY:	
Prov:	POSTAL CODE:
EVE	ERY PERSON MUST READ AND UNDERSTAND THIS FORM BEFORE PARTICIPATING IN EQUINE ACTIVITIES
To:	Stephanie Jensen Equestrian, and/or Munchkins & Minis
	(Name of Person, Organization or Company providing the Equine Activities)
their di	rectors, employees, officers, volunteers, business operators, and site property owners. (collectively called the HOST)
INITIA	L EACH ITEM BELOW AFTER READING AND UNDERSTANDING THE ITEM
1.	I Understand there are Inherent DANGERS, HAZARDS and RISKS, (collectively called RISKS) associated with Equine Activities an injuries resulting from these "RISKS" are a common occurrence.
2.	<b>I Acknowledge</b> that the Inherent " <b>RISKS</b> " of Equine Activities mean those <b>DANGEROUS</b> conditions which are an integral part of Equine Activities, <u>including but not limited to:</u>
	<ul> <li>The propensity of any equine to behave in ways that might result in injury, harm or death to persons on or around them an to potentially collide with, bite or kick other animals, people, or objects.</li> </ul>
	• The unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamilia objects, persons or other animals and hazards such as subsurface objects.
	<ul> <li>The potential for other participant (s) to act in a negligent manner that might contribute to injury to themselves or other such as failing to act within their ability or to maintain control over an equine.</li> </ul>
3.	I Freely Accept and Fully Assume All Responsibility for the Inherent "RISKS" and the possibility of personal injury, death, propert 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 for my own safety and to Participat Within My Own Limits.
5.	In addition to consideration given for my Participate in Equine Activity, I and my heirs, executors, administrators and assign (collectively called my "Legal Representatives") agree
	• To Waive All Claims that I might have against the "HOST"; and
	<ul> <li>To Release the "HOST" from Any and All Liability for any loss, damages, injury, or expense that I or my "Legar Representatives" might suffer as a result of my Participation due to any cause whatsoever including any NEGLIGENCL ON THE PART OF THE "HOST"; and</li> </ul>
	<ul> <li>To HOLD HARMLESS AND INDEMNIFY THE "HOST" from any and all liability for property damage or personal injury to any third party which might result from my Participation in Equine Activities.</li> </ul>
	signing this form I read it (as indicated by my initials above) and I stated that I understand it. I know that signing this form certain legal rights I or my "Legal Representatives" might have against the "HOST".
SIGNE	ED This day of 20
(Ppp)	T NAME OF HOST WITNESS TO SIGNING & INITIALING) (SIGNATURE OF PARTICIPANT)
(PRIN	I NAME OF FIGS 1 WITNESS TO SIGNING & INITIALING) (SIGNATURE OF PARTICIPANT)
-	(SIGNATURE OF HOST WITNESS)