

Equine Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Name of Participant: _____

Address: _____

Telephone: _____

I hereby enter into this agreement in consideration of my ability and permission to ride OR interact with any Horse owned or utilized by High Hope Haven or Pamela Kinion (hereby referred to as "Stable") whose address is 29585 Fox Hollow Road, Eugene, Oregon 97405.

IMPORTANT NOTICE

BY SIGNING THIS AGREEMENT YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE, ARISING OUT OF YOUR RIDING OR USE OF THE STABLE'S HORSE AND/OR PARTICIPATION IN EQUINE ACTIVITIES AT STABLE, INCLUDING INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF THE NEGLIGENCE OF YOU OR STABLE.

READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

By signing this form, I hereby acknowledge on behalf of myself that I have familiarized myself with activities that I will be allowed to participate in, and that I do hereby acknowledge and agree that I will participate in these activities without restriction or limitation. I recognize the inherent risks involved in riding and working with horses, including but not limited to:

- **Bites, kicks, abrasions or contusions from horses.**
- **Being thrown or bucked off by horses.**
- **Scratches or other injury from stalls or enclosures.**
- **Scratches or other injury from grooming tools and other equine equipment and tack.**
- **Allergic reactions to animals, hay, or other allergens.**
- **Tripping in holes or on materials or equipment.**
- **Slipping, falling, or otherwise being injured in the barn, in stalls, or on the grounds, which can be slippery, muddy, wet, or contain or present other hazards.**

(Initial) _____

I hereby specifically forever waive and release Stable and its principals and agents from any liability for injury arising out of the inherent risks from riding, working, or participating in a stable environment and/or with horses, as well as from the active negligence of Stable, its principals and agents.

(Initial) _____

By signing this agreement I hereby acknowledge that although there may be supervision during my time spent at Stable, there will not be a nurse on the premises and Stable and its principals and agents bear no responsibility for my health or medical care.

I agree to indemnify, save and hold harmless Stable and its principals and agents from and against any loss, liability, damage, attorneys' fees, or costs that they may incur arising out of or in any way connected with either my presence or participation at Stable or any acts of omissions of Stable principals or agents.

By signing this Agreement, and by initializing below, I hereby acknowledge my complete understanding, agreement and consent to my presence and/or participation in the activities at Stable, without restriction, without liability to Stable, its principals or agents, and with full knowledge and understanding of the disclosures, waivers, and releases herein.

(Initial)_____

If I am present at and participate in the activities of Stable, I do so at my own risk, and I hereby acknowledge and agree that Stable and/or any of its principals and agents shall bear no responsibility or risk associated with injuries that could arise from my presence or participation at Stable.

Participant's Name:_____ Date: _____

Participant's Signature:_____

PARENT/GUARDIAN WAIVER – FOR A MINOR

If the person who is to enter this agreement is under eighteen years of age, his/her parent or guardian must read and sign the following:

I _____, as Parent () or acting as Natural Guardian () of
_____, _____/_____/_____ (hereinafter "Minor")
(Minor's First, Middle, and Last Name) (Minor's Date of Birth)

hereby affirms that I have read the Agreement, understand the Agreement, and understand that this Agreement is a release of all claims for injury, death and property damage, and understand and consent to the terms on behalf of himself/herself, and on behalf of Minor, and agrees to indemnify and save and hold harmless Stable from any loss, liability, damage, or cost they may incur because of any defect in or lack of capacity to act on behalf of Minor in executing this agreement.

Parent or Guardian's Name:_____

Relationship to Participant:_____

Parent or Guardian's Signature:_____ Date:_____