

RELEASE OF LIABILITY AGREEMENT

Horses can be very dangerous. I am taking a risk and I assume responsibility for my actions.

Be advised that many states limit the liability of equine professionals for horse related injuries.

I, _____, (Rider name), acknowledge that horseback riding is a dangerous sport, which carries inherent risks of injury or even loss of life, as well as damage to my horse, my property and myself. I knowingly assume all risks, whether known or unknown, of watching, grooming, handling, or riding either my horses, or horses provided for my use. I also knowingly assume all risks, whether known or unknown, of participating in this lesson or clinic as an auditor or spectator. I release Christi and CR Rains, Banded Bird, Inc., host facility and sponsors, and their agents and employees from all liability for any act of negligence or want of ordinary care. In consideration of my participation in this lesson or clinic, I waive, release and discharge Christi and CR Rains, Banded Bird, Inc., host facility and sponsors, and their agents, employees, representatives, heirs, executors and assigns from any and all claim or liability for injury to myself, my animals or my property arising out of participation in this lesson or clinic, and further release them from any liability or responsibility for accident, damage, injury or illness to the Undersigned or any horse owned by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises where the event is held during or outside event hours. This agreement is binding on my executors, heirs, and assigns. I agree that I will defend, indemnify and hold harmless, Christi and CR Rains, Banded Bird, Inc., host facility and sponsors, and their agents and employees against all claims, demands, and causes of actions including court costs and actual attorney fees, arising from any proceeding or lawsuit brought by me or prosecuted for my benefit or on my behalf. I acknowledge that I have read this release of liability and know and understand its contents.

I do hereby give Christi Rains and parties designated by her the irrevocable right to use my name, video image or photograph in all forms of media and

in all manners for advertising, display, exhibition and inclusion in commercial products or any other lawful purposes. In addition, I waive my right to inspect or approve the finished product, including written copy that may be created in connection therewith. I also waive the right to any financial recompense for the use of my voice, physical image and participation in this event. ***This release is valid unless revoked in writing.***

Christi strongly recommends that all riders wear a safety helmet. If you choose not to wear a riding helmet, you assume all personal responsibility for that choice. Children under 18 are required to wear a safety helmet.

It is the responsibility of the Rider to carry full and complete insurance coverage on his/her horse, Personal Property and self.

WARNING:

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

Releasor Signature: _____ Date: _____

Releasor Printed Name: _____

Address: _____ City, St, Zip: _____

Cell Phone: _____ Email: _____

Emergency Contact Name and Phone: _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

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