# ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

## For Participants Under 18 Years Old

| | | | | | | |
|---|---|---|---|---|---|---|
| Infant Participant Name: | | | DOB: | Day | Month | Year |
| Address: | Street | City | | Province | Postal Code | |
| Name of Guardian: | | | DOB: | Day | Month | Year |
| Address: | Street | City | | Province | Postal Code | |
| Phone Number | | | | | | |

**The Guardian must Read and Understand prior to the above noted Infant Participating in Equine Activities**

TO: ***TIARA EQUINE*** their directors, employees, owners, volunteers, business operators, and site property owners. (all of them collectively hereunder called the HOST).

*Initial each item below After Reading and Understanding the item*

_____ 1. I am the Parent and/or Legal Guardian of the infant named above and am executing this form on behalf of the infant Participant in my capacity as parent and/or guardian and with the intent that this form be binding on myself and infant Participant for all legal purposes.

_____ 2. I Understand there are Inherent DANGERS, HAZARDS and RISKS, (collectively called RISKS) associated with Equine Activities and injuries resulting from these "RISKS" are a common occurrence

_____ 3. 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 equine to behave in ways that might result in injury, harm or death to persons on or around them and to potentially collide with, bite, or kick other animals, people, or objects.
- The unpredictability of an equine'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 an equine.
- The potential of natural or man-made hazards being present that can cause me harm, including communicable disease.

_____ 4. I Freely Accept and Fully Assume All Responsibility for the Inherent "RISKS" and the possibility of personal injury, death, property damage or loss which might result from the infant being a participant.

_____ 5. I Acknowledge that it remains my Sole Responsibility for the safety of the infant Participant and for the infant to Participate within his/her own limits.

_____ 6. In addition to consideration given for the infant to Participate in Equine Activity, I and my heirs, executors, administrators and assigns (collectively called my "Legal Representatives") agree

- To Waive All Claims that I might have against the "HOST";
- To Release the "HOST" from Any and All Liability for any loss, damages, injury, or expense that I or my "Legal Representatives" might suffer as a result of my Participation due to any cause whatsoever including any NEGLIGENCE ON THE PART OF THE "HOST"; and
- To HOLD HARMLESS AND IDEMNITY 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.

Before 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, waives certain legal rights I or my "Legal Representatives" might have against the "HOST".

***Do Not Sign Until You Understand All Items Above***

Dated this _____ day of _____ , 20 _____

PARENT and/or
LEGAL GUARDIAN: _____ _____
*Name* *Signature*

WITNESS: _____ _____
*Name* *Signature*

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