

Waiver of Liability

Please read the following carefully before signing.

I understand that horseback riding is a dangerous activity. I am aware that at some point, every rider will sustain a fall from a horse, and that such a fall may cause injury or death. I am aware that horses and ponies, regardless of training and handling practices, can cause injuries or death by biting, kicking, shoving a person, stepping on a person's foot, rearing, striking, stumbling, spooking and other unpredictable behavior.

I understand that my signature to this document constitutes a complete and unconditional release of all liability of the proprietors, relatives, employees and volunteers of Equestrian Arts to the greatest extent allowed by law in the event myself and/or the children under my care, suffer injury or death.

Name: _____ Signature: _____ Date: _____