

Release Agreement

A). Registration of Riders and Agreement Purpose: By the signing this agreement, I, the following individual, or the parent/legal guardian of a minor, do hereby voluntarily request and agree to participate in riding.

Name: _____

Street Address: _____

City, State, Zip: _____

Age: _____ E-mail _____

Home Telephone number: _____ Cell : _____

Emergency Contact Name: _____

Emergency Number: _____

RIDING EXPERIENCE: Walk, Trot, Canter, Jump **(Circle all that Apply)**

Does the rider have any physical and/or mental health conditions, problems and/or disorders that may affect his/her safety and ability to ride a horse? **YES/NO (Circle One)**

If "YES" above, please describe: _____

B). Agreement and Territory Definitions: This agreement shall be legally binding upon me and the parents/legal guardian of a minor, my heirs, estate, assigns, including all minor children, and personal representative; and it shall be interpreted according to the State of Maryland and the county of Howard. Any disputes by the rider shall be litigated in, and the venue shall be Howard County. If any clause, phrase, or word is in conflict with state law, then that single part shall be null and void. The term "horse" herein shall refer to all equine species. The term "horseback riding" shall refer to riding or otherwise handling of horse and ponies, whether from the ground or mounted. The term "rider" shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground. The terms "I", "ME" and "MY" shall herein refer to the above registered rider and the parents or legal guardians of a minor.

C). Activity Risk Classification: I UNDERSTAND THAT: Horseback riding is classified as a **rugged adventure recreational sport activity** and that there are numerous obvious inherent risks always present in such activity despite all safety precautions.

D). Nature of Horses: I UNDERSTAND THAT: No riding horse is a completely safe horse. Horses are 5-15 times larger, 20-40 times more powerful, and 3-4 times faster than a human. If a rider falls to the ground, it will generally be a distance of 3 ½ feet to 5 feet, and the impact may result in injury due to the survival instincts which may include, but are not limited to: stopping short, changing directions or speed at will, shifting it's weight, bucking, rearing, kicking, biting or running from danger.

E). Rider responsibility: I UNDERSTAND THAT: Upon mounting a horse and taking up the reins, the rider is in primary control of the horse. The rider's safety largely depends upon his/her ability to carry out simple instructions and his/her ability to remain balanced aboard the animal. I agree that the rider shall be responsible for his/her own safety, including that of an unborn child; if

the rider is pregnant Covered Bridge Stables recommends that pregnant women should not ride horses.

F). Conditions of Nature and Inspection of Premises: I UNDERSTAND THAT: Covered Bridge Stables is not responsible for total, partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some unsafe way. Some examples are thunder, lightning, rain, wind, wild or domestic animals, insects and reptiles which may run, walk, fly near, or bite/sting a horse or person; and irregular footing on/out of door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural man-made changes in landscape. The rider and/or parent/legal guardian has inspected the facilities at Covered Bridge Stables and are satisfied that all premise conditions are reasonably safe for the rider's intended purpose and usage.

G). Accidental/Medical Insurance: I AGREE THAT: Should emergency medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses.

H). Protective Headgear Warning: I AGREE THAT: I shall wear protective headgear (equestrian ASTM/SEI Approved riding helmet) while around and mounted on animals. I understand that the wearing of such headgear while mounting, riding, dismounting, and otherwise being around horses may prevent or reduce the severity of some head injuries and even prevent death from happening as the result of all other occurrences, but cannot guarantee the safety of me and/or my child. Covered Bridge Stables does not provide helmets.

I). Liability Realease: I AGREE THAT: In consideration of Covered Bridge Stables allowing my participation in this activity, under the terms set forth herein, I, the rider, and the parent/legal guardian of a minor, do agree to hold harmless and release Covered Bridge Stables, it's owners, agents, employees, officers, members, students, premises owners, affiliated organizations and insurers from legal liability due to ordinary negligence. I do further agree that except in the event of gross and willful negligence, I shall bring forth no claims, demands, actions, and causes of actions, and/or litigation, against Covered Bridge Stables and it's associates as stated above in this clause, for any economic and non-economic losses due to bodily injury, death or property damage sustained by me and/or my minor child or legal ward in relation to the premises and operations to include while riding, handling, or otherwise being near horses owned by or in the care of Covered Bridge Stables.

All riders and parents/legal guardians must sign below after reading this entire document

Signer statement of awareness. I/We, the undersigned, have read and do understand the foregoing agreement, warnings release and assumption of risk. I/We further attest that all facts relating to the applicant's physical condition, experience, and age are true and accurate.

Signature of Rider: _____ Date: _____

Printed Name of Rider _____

Parent/Legal Guardian(if minor) signature _____ Date: _____

Printed Name of Parent/Legal Guardian _____