

RELEASE OF LIABILITY AND ACKNOWLEDGMENT OF RISK

THIS RELEASE of Liability and Acknowledgment of Risk ("Release"),

is made this _____ day of _____, 20 ____ by and

between _____, student/volunteer and

_____, parent if student/volunteer is a minor, (collectively, "Student"/"Volunteer"/"Parent"), Glendale Riding School, Inc. ("Glendale"), Mary Haven Foster, and James W. Foster.

WHEREAS, Student/Volunteer/Parent requests permission to enter the properties of Glendale, including the surrounding lands of Mary Haven Foster and James W. Foster, located in Talbot County, Maryland for the purpose of participating in activities associated with horseback riding, including but not limited to training, teaching, riding and the learning of horsemanship.

WHEREAS, Student/Volunteer/Parent has inspected Glendale's premises and acknowledges and appreciates the inherent risks, dangers and hazards involved in riding horses since horses, by their very nature and size, behave in a sometimes unexpected, unpredictable and hazardous manner sometimes endangering persons around them.

WHEREAS, Student/Volunteer/Parent further acknowledges the risks, dangers and hazards involved due to their own negligent actions, such as failure to maintain control over a horse or failure to ride within their ability.

NOW, THEREFORE WITNESSETH that, in consideration of the following covenants and agreements, the parties hereto agree as follows:

ASSUMPTION OF RISK. Student/Volunteer/Parent agrees to assume all risks of injury to themselves or their property that may be sustained in connection with the above stated and associated activities.

RELEASE OF LIABILITY. Student/Volunteer/Parent and their heirs and assigns release and discharge Glendale, Mary Haven Foster, and James W. Foster, their agents, and all other participants in the above stated activities from all claims and actions of any sort for loss or injuries sustained to Student/Volunteer/Parent or their property during Student's/Volunteer's/Parent's participation in the above stated activities due to negligence or any other fault. Further, Student/Volunteer/Parent acknowledges that, in the event of any litigation involving participating in activities associated with horseback riding at Glendale, the issues would best be decided by a judge and not a jury; and expressly waives any right to a trial by jury.

PROTECTIVE HEADGEAR WARNING. Student/Volunteer/Parent AGREES THAT: I alone and/or on behalf of my child or legal ward have been fully warned and advised by Glendale that PROTECTIVE HEADGEAR WHICH MEETS OR EXCEEDS ASTM SEI QUALITY STANDARDS MUST BE WORN WHILE RIDING AND BEING NEAR HORSES, and I do understand that the wearing of such headgear at these times may reduce severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall and other occurrences.

IN WITNESS WHEREOF, I have executed this release.

STUDENT / VOLUNTEER SIGNATURE

PRINT NAME

HOME PHONE NUMBER

LEGAL GUARDIAN / PARENT SIGNATURE
(if Student / Volunteer is under 18)

CELL PHONE NUMBER(S)

PRINT NAME

ADDRESS

EMERGENCY CONTACT TELEPHONE NUMBER(S)

E-MAIL ADDRESS(ES)