

Liability Waiver and Assumption of Risk Agreement

To: **Panorama Ridge Riding Club or Unicorn Stables** (Both hereinafter referred to as "PRRC") and to **PRRC representatives, staff, volunteers, agents and PRRC members.**

Event: _____ Date: _____

Event Locations: Panorama Ridge Riding Club or Unicorn Stables as an alternate location for any PRRC event.

I acknowledge that the sport of horse riding is a high risk activity and that I am participating at my own risk and choice, and I am in full knowledge of the potential hazards which are inherent in the sport. * _____

I further acknowledge the inherent risks in riding and working around horses, which risks include bodily injury to horse and/or rider and/or anyone in the presence of horses, which result from normal use, competition, or schooling. * _____

In consideration of being allowed to participate in the event, I hereby assume all risk and I hereby release PRRC/PRPC members and the owners and occupiers of the land upon which the competition is being held, from responsibility, liability and all claims of any nature and any kind which I may have from my participation in this activity, included but not limited to bodily injury or death to myself or my horse or any minors in my care and damage to property arising from any cause whatever, including the negligence of one or more of the individuals or the organization referred to herein. * _____

I HEREBY DECLARE THAT IN SIGNING THIS AGREEMENT THAT I HAVE READ AND FULLY UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS STATED HEREIN AND THAT IT IS BINDING UPON MY EXECUTORS, HEIRS AND ASSIGNS. * _____

Name of Rider _____ HCBC# _____

Signature of Rider _____ Date: _____

Address _____

Phone _____

Name of Horse Owner _____

Signature of Horse Owner _____ Date: _____

It is understood that **this form must be filled out completely with no blank spaces** or that the permission to ride at Panorama Ridge Riding Club is revoked.

If the rider is 18 years of age or younger the parent or guardian must also initial *above and sign below.

I acknowledge as parent/guardian of _____ that I have read and fully understand and agree to the terms and conditions stated herein on behalf of _____ and myself.

Signature of Parent/Guardian _____

Name of Parent/ Guardian (please print) _____

Address _____

Phone # _____ alternate # _____

Signature of Parent/Guardian _____ Date: _____