



Trust Resolve Ownership Thoughtfulness

Freedom Hooves Therapeutic Riding of Northwest Colorado

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(970)701-9085

2017 Poker Ride Liability Waiver Form

All or part of this operation is conducted on Public Lands under special permit from the U.S. Bureau of Land Management.

Participant Name _____

Address _____

Phone (Home) _____ (Cell) _____

Email _____

I hereby enter into this agreement in consideration of my ability and permission to ride in the Freedom Hooves Poker Ride.

IMPORTANT NOTICE

BY SIGNING THIS AGREEMENT YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE, ARISING OUT OF YOUR RIDING AND/OR PARTICIPATION IN EQUINE ACTIVITIES SPONSORED BY Freedom Hooves THERAPEUTIC RIDING OF NW COLORADO, INCLUDING INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF THE NEGLIGENCE OF YOU OR OTHER PARTICIPANTS.

READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT.YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

By signing this form, I hereby acknowledge on behalf of myself that I have familiarized myself with the activities that I will be allowed to participate in, and that I do hereby acknowledge and agree that I will participate in these activities without restriction or limitation. I recognize the inherent risks involved in riding and working with horses, including but not limited to:

- ◆ Bites, kicks, abrasions or contusions from horses. Being thrown or bucked off by horses.
- ◆ Snake Bites
- ◆ Scratches or other injury from grooming tools and other equine equipment and tack. Allergic reactions to animals, hay, or other allergens.
- ◆ Tripping in holes or on materials or equipment.
- ◆ Slipping, falling, or otherwise being injured on the grounds, which can be slippery, muddy, wet, or contain/present other hazards.

I hereby specifically forever waive and release Freedom Hooves Therapeutic Riding of Northwest Colorado, hereinafter referred to as Freedom Hooves, and its directors, principals and agents and assigns from any liability for injury arising out of the inherent risks from riding, working or participating in an environment with horses.

Initial _____

By signing this agreement I hereby acknowledge that although there may or may not be EMT's present on the Poker Ride, Freedom Hooves and its directors, principals and agents bear no responsibility for my health, safety or medical care.

I agree to indemnify, save and hold harmless Freedom Hooves and its directors, principals and agents from and against any loss, liability, damage, attorneys' fees, or costs that they may incur arising out of or in any way connected with either my presence or participation at the Freedom Hooves Poker Ride or any acts or omissions of Freedom Hooves, its directors, principals or agents.

By signing this Agreement, and by initialing the paragraph below, I hereby acknowledge my complete understanding, agreement and consent to my presence and/or participation in the activities of Freedom Hooves, without restriction and without liability of Freedom Hooves, its directors, principals or agents, and with full knowledge and understanding of the disclosures, waivers, and releases contained herein.

Initial _____

My presence at and/or participation in the activities of Freedom Hooves is at my own risk, and I hereby acknowledge and agree that Freedom Hooves and/or its directors, principals and agents shall bear no responsibility or liability associated with any injuries that may arise from my presence or participation at Freedom Hooves Poker Ride.

Printed Participant Name _____ Date _____

Participant's/Guardian's Signature _____

Parent or Guardian Name (if participant is under 18) _____

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