ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants Over the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

	e benefit of:		
		ite	directors, officers
employees, volunteers, business operators, agents and site prop the generality of the foregoing, "Equine Activities" includes but is r by the "Host" to the Participant.	perty owners or lessees not limited to trail rides, p	(collectively the "Ho:	st"). Without limiting
Initial Each Item below after Reading and Understanding	g each item:		
1. I am aware that there are inherent dangers, hazards and injuries resulting from these "Risks" are a common occu those dangerous conditions which are an integral part of (a) the propensity of any equine to behave in ways that and to potentially collide with, bite or kick other anima (b) the unpredictability of an equine's reaction to su unfamiliar objects, persons or other animals and haz (c) the potential for other participants to behave in a rothers, including failing to act within their abilities to result in the control of the cont	urrence. I am aware that "Equine Activities", inclumay result in injury, harrals, people or objects; ch things as sounds, sards such as subsurface negligent manner that m	the "Risks" of "Equ ding but not limited to n or death to persons sudden movement, objects; ay contribute to inju	ine Activities" mea o: s on or around ther tremors, vibrations
2. I freely accept and fully assume all responsibility for all "F or loss resulting from my participation in "Equine Activities		personal injury, dea	th, property damag
3. I agree that although the "Host" has taken steps to reduce is not possible for the "Host" to make the "Equine Activerms of this waiver even if the "Host" is found to be neg my participation in "Equine Activities".	vities" completely safe. I	accept these "Risk	s" and agree to the
 4. In addition to consideration given to the "Host" for my executors, administrators and assigns (collectively my "Le (a) to waive all claims that I have or may have in the futu (b) to release and forever discharge the "Host" from all resulting from my participation in the equine activity to use such care as a reasonably prudent and caref duty imposed by law, breach of contract or mistake of to be liable for and to hold harmless and indemnify the demands, including court costs and costs on a solic kind arising out of or in any way connected with my present the supplier of th	egal Representatives") a re against the "Host"; liability for any persona due to any cause, includ ul person would use und or error in judgment of the the "Host" from all action citor and own client basi	gree: Injury, death, properling but not limited to er similar circumstare "Host"; and hs, proceedings, clais, and liabilities of w	erty damage, or los o negligence (failur nces), breach of an ms, damages, cost
5. I agree that this waiver and all terms contained herein Province or Territory of Canada in which the "Equine Act the exclusive jurisdiction of the courts of that Province or jurisdiction over the terms and claims referred to here Province or Territory of Canada in which the "Equine Acti	tivities" are provided by t Territory of Canada and in. Any litigation to enfo	he "Host". I hereby in I agree that no othe proce this waiver will	rrevocably submit to er court can exercis
6. I confirm that I have had sufficient time to read and unde represents the entire agreement between myself an Representatives".			
7. I confirm that I have reached the age of majority in the pro-	ovince in which I am part	icipating in "Equine A	Activities".
Please Print Clearly		Data of Dieth	
Print - Participant Name			
Address	City	Province	Postal
Phone # ()			
(Signature of Participant)	Signed this o	lay of	, 20
(Print Name of Witness to Signing and Initialing)			