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!

Every Person Must Read and Understand this Waiver Be	ore Participatin	g in Equine Activitie	es	
The following waiver of all claims, release from all liability, assumpting agreement are entered into by me (the Participant) with and for the		greement not to sue an	d other terms of this	
		, its	directors, officers,	
employees, volunteers, business operators, agents and site prope the generality of the foregoing, "Equine Activities" includes but is no by the "Host" to the Participant.	rty owners or less t limited to trail ride	ees (collectively the "Ho	ost"). Without limiting	
Initial Each Item below after Reading and Understanding	each item:			
1. I am aware that there are inherent dangers, hazards and ri injuries resulting from these "Risks" are a common occur those dangerous conditions which are an integral part of "I (a) the propensity of any equine to behave in ways that m and to potentially collide with, bite or kick other animal (b) the unpredictability of an equine's reaction to sucl unfamiliar objects, persons or other animals and hazar (c) the potential for other participants to behave in a ne others, including failing to act within their abilities to make the sum of the sum	rence. I am aware Equine Activities", in ay result in injury, so people or object on things as soundeds such as subsurgligent manner the	that the "Risks" of "Eqincluding but not limited harm or death to persons; ds, sudden movement, face objects; at may contribute to inj	uine Activities" mean to: ns on or around them tremors, vibrations,	
2. I freely accept and fully assume all responsibility for all "Rison or loss resulting from my participation in "Equine Activities"	isks" and possibilities of personal injury, death, property damage ".			
is not possible for the "Host" to make the "Equine Activity	be the "Risks" and increase the safety of the "Equine Activities", it vities" completely safe. I accept these "Risks" and agree to the gligent or in breach of any duty of care or any obligation to me in			
4. In addition to consideration given to the "Host" for my p executors, administrators and assigns (collectively my "Leg (a) to waive all claims that I have or may have in the future (b) to release and forever discharge the "Host" from all li resulting from my participation in the equine activity d to use such care as a reasonably prudent and careful duty imposed by law, breach of contract or mistake or (c) to be liable for and to hold harmless and indemnify the demands, including court costs and costs on a solicit kind arising out of or in any way connected with my pa	pal Representatives against the "Host ability for any pers ue to any cause, in person would use error in judgment of the "Host" from all a or and own client	s") agree: "; sonal injury, death, prop ncluding but not limited under similar circumsta of the "Host"; and actions, proceedings, cla basis, and liabilities of v	erty damage, or loss to negligence (failure inces), breach of any tims, damages, costs	
5. I agree that this waiver and all terms contained herein at Province or Territory of Canada in which the "Equine Active the exclusive jurisdiction of the courts of that Province or Territory of Canada in which the "Equine Active	ities" are provided erritory of Canada . Any litigation to	by the "Host". I hereby and I agree that no oth enforce this waiver wil	irrevocably submit to er court can exercise	
6. I confirm that I have had sufficient time to read and unders represents the entire agreement between myself and Representatives".				
7. I confirm that I have reached the age of majority in the prov	rince in which I am	participating in "Equine	Activities".	
Please Print Clearly				
Participant Name		Date of Birth		
Address	City	Province	Postal	
Phone # () Email:				
	Signed this	day of	. 20	
(Signature of Participant)	<u> </u>	,	,	
(Print Name of "Host" Witness to Signing and Initialing)				
(Signature of "Host" Witness)	Signed this	day of	, 20	
(g				

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants <u>Under the Age of Majority</u> in the Province or Territory in which the Equine Activities are Provided by the Host <u>WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS.</u> READ IT CAREFULLY!

The Parent/Guardian Must Read and Understand this North The following waiver of all claims, release from all liability, assumptions agreement are entered into by me on behalf of the Infant Participation.	imption of all risks,	agreement not to sue an	•	
operators, agents, and site property owners or lessees (the "Activities" includes but is not limited to trail rides, pack trips or rid	Host"). Without liming instruction provi		e foregoing, "Equine	
1. I am the Parent/Guardian of the Infant Participant and capacity as Parent/Guardian and with the intent that his purposes.				
2. I am aware that there are inherent dangers, hazards a resulting from these "Risks" are a common occurrence dangerous conditions which are an integral part of "Equ (a) the propensity of any equine to behave in ways that and to potentially collide with, bite or kick other anim (b) the unpredictability of an equine's reaction to sunfamiliar objects, persons or other animals and hat (c) the potential for other participants to behave in a others, including failing to act within their abilities to	e. I am aware that ine Activities", includ that may result in injury nals, people or object things as sout a substants such as substants incontrol over maintain control over the Activities.	the "Risks" of "Equine A ding but not limited to:	ctivities" mean those as on or around them tremors, vibrations, ury to themselves or	
3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities".				
4. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".				
 5. In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree: (a) to waive all claims that the Infant Participant has or may have in the future against the "Host"; (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Infant's participation in "Equine Activities". 6. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". 7. I confirm that I have had sufficient time to read and understand this wai				
Infant Participant's Name				
Address	City	Province	Postal	
Parent/Guardian's Name		Date of B	Date of Birth	
Address	City	Province	Postal	
Phone # () Email:				
(Signature of Parent/Guardian of Infant Participant)	Signed this	day of	, 20	
(Signature of Parent/Guardian of Infant Participant)				
(Print Name of "Host" Witness to Signing and Initialing)	(Signature of "Host" Witness)			