ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

Each participant or Parent/Guardian of a minor participant Must Read and Understand this Waiver **Before Participating in Equine Activities**

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me (the Participant) with and for the benefit of: Horse Trials PEL, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to, competitions, tournaments organized and/or operated by the "Host", riding instruction, coaching and training provided by the "Host" to the Participant.

Initial Each Item below after Reading and Understanding each item:							
1. I am aware that there are inherent dangers, hazards and risks (collectively "Risks") associ and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risk							
mean those dangerous conditions which are an integral part of "Equine Activities", including b							
	a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around						
them and to potentially collide with, bite or kick other animals, people or objects;							
b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations,							
unfamiliar objects, persons or other animals and hazards such as subsurface objects;							
	c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or						
others, including failing to act within their abilities to maintain control over an equine.							
d) the potential of natural or man-made hazards being present that can cause me harm, in	cludi	ng communicable					
disease.							
2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and							
disease, medical payments, death, property damage or loss resulting from my participation in							
3. 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 even if the "Host" is found to be negligent or in breach of any	/ dut	y of care or any					
obligation to me in my participation in "Equine Activities".							
4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin,							
executors, administrators and assigns (collectively my "Legal Representatives") agree:							
a) to waive all claims that I have or may have in the future against the "Host";							
b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss							
resulting from my participation in the equine activity 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		ima domogoa costa					
demands, including court costs and costs on a solicitor and own client basis, and liabilities of v							
arising out of or in any way connected with my participation in "Equine Activities".	viiat						
5. I agree that this waiver and all terms contained herein are governed exclusively and in all i	esna	acts by the laws of the					
Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I h							
the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that							
jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver w							
Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".							
6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I	unde	rstand that this					
agreement represents the entire agreement between myself and the "Host", and it is binding of							
Representatives".							
7. I confirm that I have reached the age of majority in the province in which I am participating	in "E	Equine Activities" OR I					
am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the							
capacity as Parent/Guardian and with the intent that this waiver be binding on myself and the	Infar	nt Participant for all					
legal purposes.							
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Participant Name	Tel #	Bi	rthdate mm/dd/yyyy
Address	City	Province	Postal Code
Parent/Guardian's Name	Date of Birth		Tel #
(Signature of Participant OR Parent/Guardian)	 Date Signed	mm/dd/yyy	/y