COMMONWEALTH DRESSAGE AND COMBINED TRAINING ASSOCIATION

Release and Waiver of Right to Sue and Assumption of all Risks

This Equine Activity Liability Release, Waiver of Right to Sue, and Assumption of all Risks Agreement (this Agreement) is hereby given by the person who has signed below (the Undersigned) to the Commonwealth Dressage and Combined Training Association (CDCTA) (the Equine Activity Sponsor) and its agents, employees, and assigns. This Agreement is given in part under the Virginia Equine Activity Liability Act (Virginia Code Ann. Section 3.2- 6200, *et seq.*) as it may now provide or be hereafter amended (the Act). All terms defined by the Act mean the same thing in this Agreement, and the Act is hereby incorporated into this Agreement by reference.

The Undersigned acknowledges that s/he has been advised and does otherwise understand and acknowledge that anything to do with horses, including, but not limited to, riding, handling, exercising, training or working around them, is an intrinsically **DANGEROUS** activity. The Undersigned acknowledges that s/he has been notified and hereby assumes all of the risks intrinsic in equine activities, including (i) the propensity of an equine to behave in dangerous ways which may result in injury to persons on or around them; (ii) the inability to predict an equine's reaction to sound, movements, objects, persons, or animals; and (iii) hazards of surface and subsurface conditions.

Being aware of this, and in consideration of the right to participate in any event sponsored or recognized by CDCTA, the Undersigned hereby acknowledges that s/he has inspected, or been offered the opportunity to inspect, the grounds on which the event shall take place, and acknowledges that the same are safe and suited for the purpose intended.

The Undersigned agrees to assume full responsibility for, and the risk of, bodily injury, death or property damage that s/he may suffer as a result of riding, working at, or participating in any activity sponsored or recognized by CDCTA.

The Undersigned further hereby RELEASES, agrees to assume all risks, and waives all rights which s/he may have or hereafter have against CDCTA, its agents, its successors, assigns and employees, for death, personal injury or property damage which is in any way associated with any activity sponsored or recognized by CDCTA, and does hereby WAIVE the right to sue or to bring any action against them.

This Agreement is intended to be as broad and inclusive as possible, and if any part of it is held to be invalid, it is agreed that the rest of it shall continue in full force and effect. This Agreement shall be construed under the Laws of the Commonwealth of Virginia.

The Undersigned agrees that s/he has read this Agreement, understands it, and is signing it voluntarily.

SIGNATURE	_PRINTED NAME:
(PARENT/GUARDIAN IF UNDER 18)	
DATE:	
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ADDRESS:	
EMERGENCY CONTACT, NAME:	
EMERGENCI CONTACI, NAME.	
PHONE:	