

Release and Hold Harmless Agreement Sharn Wordley Equestrian Florida LLC & 570 LLC

1. I, _____, the undersigned have read and understand, and freely and voluntarily enter into this Release and Hold Harmless Agreement with the Sharn Wordley Equestrian Florida LLC & 570 LLC.

2. I understand the potential dangers that I could incur in equine activities, including but not limited to mounting, riding, walking, boarding, feeding and any interactions with other horses. Understanding those risks I here by release the Sharn Wordley Equestrian Florida LLC & 570 LLC, its employees, successors and assigns from any liability what so ever in the event of injury or damage of any nature (or perhaps even death) to me or anyone else caused by or incidental to my electing participate in equine activities at the Sharn Wordley Equestrian Florida LLC & 570 LLC.

4. I understand and recognize and warrant that this Release and Hold Harmless Agreement, is being voluntarily and intentionally signed and agreed to, and that in signing this Release and Hold Harmless Agreement I know and understand that this Release and Hold Harmless Agreement may further limit the liability of equine professionals to include any activity, whatsoever, involving an equine, including death, personal injury and/or damage to property.

5. I recognize that the risk of serious injury is increased by not wearing certified helmet while horseback riding and agree to wear a certified protective helmet at all times while horseback riding.

6. I recognize that the Sharn Wordley Equestrian Florida LLC & 570 LLC has various equine professionals and agree that I know which equine professional(s) I will be working with, and acknowledge that I agree said equine professional(s) has/ have made reasonable and prudent efforts to determine my ability to engage in the equine activity, and has/have sufficient knowledge of my equine and horseback riding skills as to relieve, release and hold harmless said equine professional(s) from any continuing duty to monitor my equine activities.

7. I further voluntarily agree and warrant to Release and Hold Harmless this (these) equine professional(s) from any liability whatsoever, including, but not limited to, any incident caused by or related to said equine professional's negligence, relating to injuries known, unknown, or other wise undisclosed; including, but not limited to, injuries, death or property damage from: mounting; riding; dismounting; walking; grooming; feeding; use of horse barn, paddock, trails or horse ring in any capacity; falling off horse whether horse is bucking, flipping, or spooked; and/or my failure to understand any equine professional's directions relating to my riding or otherwise use and control, or lack thereof, of my horse or the horse I have been assigned to.

I have carefully read each paragraph listed above and understand its contents.

Name (print)_____

Children's names_____

Signature_____

Dated _____

Street Address_____

City_____

Zip_____

Phone_____

Emergency Contact_____