



Rider Name: \_\_\_\_\_

#### WAIVER OF LIABILITY AND ASSUMPTION OF RISK

I, the undersigned, wish to ride a horse and participate in the Opportunity Series Horse Show. I understand that riding horses involves accepting certain risks. Those risks include, but are not limited to, the risk of injury resulting from falling from a horse, being stepped on or kicked by a horse, from a horse running into fences, trees, or buildings, and injuries resulting from tripping or falling over obstacles. In addition, I understand that the injuries sustained from riding horses could be serious or could even result in death. Despite this and other risks, and fully understanding such risks, I wish to ride a horse and compete in the Opportunity Series Horse Shows. I hereby assume all the risks of riding horses. I also hereby hold harmless the horse owner, if not my own horse, and agree to defend them against any claims or actions resulting from my riding horses, including all expenses and attorney fee. I hereby release any employees or volunteers of the Opportunity Series, LLC along with any other horse owners with animals stabled there from any and all liability, and I understand that this release shall be binding upon my estate and all my representatives. I have fully read this Waiver of Liability and Assumption of Risk carefully and understand that by signing below I am agreeing, on behalf of myself, my estate, my heirs, representatives and assigns not to sue any employees/volunteers, and horse owners with animals stabled there, or to hold him/her/them liable for any injury, including death, from riding horses and participating the Opportunity Series Horse Show. I understand the terms of this Waiver of Liability and Assumption of Risk, and I intend to be fully bound by this agreement. By virtue of my signature, I acknowledge and agree to all terms and conditions set forth on this form and further acknowledge that I have carefully read this agreement and understand what I am signing. Parent or Guardian of Minor Applicant: As the Parent or Guardian of the applicant, I hereby certify that this applicant (child) is less than 18 years of age. I am aware of the risks incurred in riding horses and the other horse activities described in this waiver and have discussed them with my child. I have discussed the rules and safety procedures with our/my child and am satisfied that s/he understands them. I understand that by signing below I am agreeing, along with my child, on behalf of myself, my representatives and assigns, not to sue any owners, employees/volunteers, or other horse owners with animals stabled there, or to hold him/her/them liable for any injury, including death, that results from my child riding horses or from participating in the Opportunity Series Horse Show. I understand the terms of this Waiver of Liability and Assumption of Risk, and I intend to be fully bound by this agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Signer: \_\_\_\_\_