

## RIDER LIABILITY WAIVER/RELEASE FORM

LIABILITY RELEASE I AGREE THAT: In consideration of Castle Hill Farm LLC allowing my participation in this activity, under the terms set forth herein, I, the RIDER, for myself and on behalf of my child and/or legal ward, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release, and discharge Castle Hill Farm LLC, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, affiliated organizations, and Insurers, and others acting on its behalf (hereinafter collectively refer to as "Associates"), of and from all claims, demands, causes of action and legal liability, whether the same be known or unknown, anticipated or unanticipated, due to Castle Hill Farm LLC's and/or ITS ASSOCIATES ordinary negligence; I shall not bring any claims, demands, legal actions and causes of action, against Castle Hill Farm LLC and ITS ASSOCIATES as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of Castle Hill Farm LLC, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of Castle Hill Farm LLC, whether on or off the premises of Castle Hill Farm LLC.

All Riders and Parents or Legal Guardians must sign below after reading this entire document:

## SIGNER STATEMENT OF AWARENESS

I/WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT'S PHYSICAL CONDITION, EXPERIENCE, & AGE ARE TRUE AND ACCURATE.

## SIGNATURE PAGE

## **SIGNATURE OF RIDER**

	DATE
SIGNATURE OF PAR	RENT/GUARDIAN NAME (INCASE OF MINOR)
	DATE
RIDER Address in full	l:
RIDER Cell Phone #:_	
Guardian Phone (Inca	se of minor) #:
Email Address:	
GUARDIAN Email Ac	ldress:
<b>Additional Contact</b>	<u>s:</u>
EMERGENCY CONT	CACT:
PHONE #:	RELATIONSHIP_