

PARTICIPANTS RESPONSIBILITIES OF ACTIVITIES, ASSUMPTIONS OF RISK, RELEASE AND WAIVER OF LIABILITY

IN CONSIDERATION of being permitted to use the services and facilities at the Southern Dutchess Equestrian Center in Wappingers Falls, NY, I expressly acknowledge and represent

- 1. I am physically fit and possess the physical strength to meet my responsibilities as a participant on the activities of my choosing, including, but not limited to those offered by the Southern Dutchess Equestrian Center. I further state and represent that I will not participate in these activities while under the influence of drugs or alcohol.
- 2. I understand that horses, even the most well-trained, can be unpredictable and difficult to control and may become startled due to causes beyond my control. I acknowledge that training, riding and trail conditions may vary constantly because of weather and natural causes. I also understand that water, ice, variations in terrain, rocks, forest growth, debris and other obstacles and hazards, including other participants, exist throughout the properly. Therefore, I acknowledge that participation in these activities can be hazardous and that I could suffer serious injury as a participant or observer.
- 3. I am aware that horseback riding is an athletic activity which poses potentially serious risks of injury to its participants. I understand that the horse or myself, as rider, participant or observer, may be injured because of the nature of the activity of which I am engaged, through no fault of myself or anyone else, as well as the result of negligence, of myself or others, and I voluntarily assume all risks in connection with my participation in any activity associated with Southern Dutchess Equestrian Center, whether on or off its premises.
- 4. I hereby expressly acknowledge my understanding and acceptance of the foregoing, and agree to assume the risk of any personal injuries which I may incur during my use of the Southern Dutchess Equestrian Center activities and facilities. In the event that there are children or others in my party, I agree to advise them of the contents of this agreement.
- 5. With knowledge of the foregoing, and as an inducement for Southern Dutchess Equestrian Center to allow me to participate in the Equestrian program, including but not limited to riding, riding lessons, equestrian activities, riding camp, grooming, stable duties and chores and related activities, I hereby agree to indemnify and hold harmless and to waive and release any and all rights that I or my heirs, successors or assigns may have to make a claim against Southern Dutchess Equestrian Center, its owners, employees, representatives, agents, members, participants, landowners and lessees, arising from any damages, injury or death which I might sustain or which might occur to any horse that I am riding as a result of my horseback riding or other activity.

BY SIGNING THIS RELEASE AND WAIVER, I UNDERSTAND THAT I AM GMNG UP, WAIVING AND RELEASING ANY AND ALL RIGHTS I HAVE TO SUE OR MAKE ANY CLAIM WHICH I MIGHT HAVE OR WHICH MIGHT SUBSEQUENTLY ARISE OR OCCUR AGAINST SOUTHERN DUTCHESS EQUESTRIAN CENTER, ITS OWNERS, EMPLOYEES, MEMBERS, AGENTS, REPRESENTATIVES, PARTICIPANTS, LANDOWNERS AND LESSEES, FOR ANY INJURIES TO MYSELF OR THAT I CAUSE TO ANYONE ELSE OR ANY HORSE RIDDEN BY ANOTHER WHILE SO ENGAGED. IT IS MY INTENT TO GIVE UP THESE RIGHTS AND TO INDEMNIFY AND HOLD HARMLESS ALL OF THE AFOREMENTIONED PARTIES IN THIS AGREEMENT, AND I DO SO KNOWINGLY AND VOLUNTARILY.

I further authorize any emergency medical care and/or treatment, which may be necessary, should any accident or injury occur. I understand that I will be entirely responsible for any medical expenses arising from any injury sustained while participating in any activity associated with the Southern Dutchess Equestrian Center, both on or off its premises.

DATED:	SIGNATURE OF RELEASOR
DATED:	SIGNATURE OF RELEASOR



PARENT AND/OR GUARDIAN RELEASE AND WAIVER

I am the parent or guardian of	, a minor and on said
minor's behalf, and on my behalf, and on behalf of all other parents a	and/or guardians of the minor, I accept and
execute the foregoing "PARTICIPANTS RESPONSIBILITIES OF ACTIVITI	ES, ASSUMPTIONS OF RISK, RELEASE AND
WAIVER OF LIABILITY", as an inducement to allowing my child/guard	ian to participate in the activities at Southern
Dutchess Equestrian Center. I further authorize and emergency medi	cal care and/or treatment which may be
necessary should any accident or injury occur. I also understand that	I will be entirely responsible for any medical
expenses arising from any injury incurred while participating in any a	activity associated with the Southern Dutchess
Equestrian Center, both on or off its premises.	
DATED:	
PRINT NAME OF MINOR:	
PRINT NAME OF PARENT OR GUARDIAN:	
SIGNATURE OF PARENT OR GUARDIAN:	