

**CIDERMILL FARMS ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY –**

PARTICIPANT: (PRINT) \_\_\_\_\_ D.O.B: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOWN/CITY: \_\_\_\_\_ PROV. \_\_\_\_\_ P.C. \_\_\_\_\_

PARENT OR GUARDIAN (if participant is under 18 yrs): \_\_\_\_\_

ADDRESS:(if different from above) \_\_\_\_\_ TOWN/CITY: \_\_\_\_\_ PROV. \_\_\_\_\_ P.C. \_\_\_\_\_

E-MAIL: \_\_\_\_\_ CELL: \_\_\_\_\_ HOME PH: \_\_\_\_\_

Every person must read and understand this form before participating in equine activities.

To: Pat, Dewar and Sean Laing,, **CIDERMILL FARMS INC.**, and their directors, employees, officers, volunteers, business operators, and site property owners (all of them collectively called the HOST)

Initial each item below After Reading and Understanding the item.

\_\_\_\_ 1. I am the Parent and/or Legal Guardian of the infant Participant named above and am executing this form on behalf of the infant participant in my capacity as parent and/or legal guardian and with the intent that this form be binding in the myself and infant participant for all legal purposes.

\_\_\_\_ 2. I Understand there are inherent **DANGERS, HAZARDS AND RISKS** (collectively called **RISKS**) associated with equine activities and injuries resulting from these "RISKS" are a common occurrence.

\_\_\_\_ 3. I Acknowledge that the Inherent "**RISKS**" of Equine Activities mean those **DANGEROUS** conditions which are an integral part of Equine Activities, including but not limited to:

- The propensity of any equine to behave in ways that might result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects.
- The unpredictability of the equine reaction to such things as sound, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects.
- The potential for other participant(s) to act in a negligent manner that might contribute to injury to themselves or others, such as failing to act within their ability to maintain control over an equine.

\_\_\_\_ 4. I **Freely Accept and Fully Assume All Responsibility** for the inherent "**RISKS**" and the possibility of personal injury, death, property damage or loss resulting from my Participation in Equine Activities.

\_\_\_\_ 5. I acknowledge that it remains my **Sole Responsibility** to act in such a manner as to be responsible for my own safety and to Participate within My Own Limits, and to use safe and where necessary CSA approved equipment in accordance with the laws of Ontario while Participating in Equine Activities, including but not limited to, a CSA approved riding helmet for all Dressage, Hunter/Jumper competitors and for all competitors under 18 years of age.

\_\_\_\_ 6. In addition to my consideration given for my Participation in Equine Activity, I and my heirs, executors, administrators, and assigns (collectively called my "**Legal Representatives**") agree

- To waive all claims that I or the infant Participant might have against the "HOST" and
- To Release the "HOST" from any and all Liability for any loss, damages, injury, or expense that I or my or "Legal Representatives" might suffer as a result of my Participation due to any cause whatsoever including any **NEGLIGENCE ON THE PART OF "HOST"** and
- To **HOLD HARMLESS AND INDEMNIFY THE "HOST"** from any and all liability for property damage or personal injury to any third party which might result from my participation in Equine Activities.

Before signing this form, I read it, (as indicated by my initials above) and stated that I understand it. I know that signing this form waives certain legal rights I or my "Legal Representatives" might have against the "HOST"

SIGNED This \_\_\_\_ day of \_\_\_\_\_ (month) 2017. \_\_\_\_\_ SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_ SIGNATURE OF WITNESS

Host Witness (PRINT)

**DO NOT SIGN UNTIL YOU UNDERSTAND ALL ITEMS ABOVE**