

## **Baltimore County Maryland**

## **Baltimore County Horse Council**

This document waives important legal rights. Read carefully before signing.

## ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY:

I hereby confirm participant is in good health and able to participate in the activity. I acknowledge the activity may involve risk and danger of bodily injury or death. I fully accept and acknowledge the activities may involve risk, and I hereby assume the risk and responsibility for all dangers and risks associated with the participant in the activity. I further understand that concussion information is available at <a href="http://www.cdc.gov/concussion">www.cdc.gov/concussion</a>

I acknowledge Baltimore County, Maryland, Baltimore County Horse Council, Inc., the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each on "activity representative" and collectively the "activity representatives"), shall not be responsible or liable in any regard or manner for any and all property damage or bodily injury (including serious physical injury or even death) incurred by participant or any party related thereto as a result of his/her participation in the activity.

I have read, fully understand, and hereby freely sign, approve of, and agree to the terms of this registration form. I hereby unconditionally release, discharge, covenant not to sue, waive my rights and remedies, and agree to hold harmless the activity representatives from any and all claims, costs, demands, losses, damages, or expenses associated with, in whole or in part, participant's involvement with the activity. I certify all answers and information provided on this registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council in writing if any information provided in this registration form is incorrect or changes through the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

I AGREE in consideration for my participation in the Baltimore County Horse Council Equestrian Program at the Agricultural Center to the following:

I AGREE that I choose to participate voluntarily in the Baltimore County Horse Council Equestrian Program at the Agricultural Center, or as a parent or guardian of a minor. I am fully aware and acknowledge that horse sports and the Baltimore County Horse Council Program involve inherently dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death (collectively, "Harm").

I AGREE to release Baltimore County Maryland/Baltimore County Horse Council, Inc. and their respective trustees, officers, employees, agents, attorneys and its and their heirs, administrators, successors and assigns ("Releasees") from all claims for money damages, or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of Baltimore County Maryland/Baltimore County Horse Council at the Agricultural Center. Further, I AGREE to expressly assume all risks of HARM to me or my horse.

I AGREE to indemnify, that is to pay any losses, damages, attorney's fees and costs incurred by Baltimore County Maryland/Baltimore County Horse Council, Inc. and/or any of the Releasees and hold them harmless with respect to claims for Harm to me or my horse and property, and for claims made by others for any Harm caused by me or my horse or property while participating in the Baltimore County Horse Council Equestrian Program, at the Agricultural Center. I understand that I must wear approved protective headgear while Equestrian at the Agricultural Center in Baltimore County Maryland, while participating in the Baltimore County Horse Council Equestrian Program and understand that no protective equipment can guard against all injuries.

If I am a parent or guardian of a minor, I consent to the child's participation in the Baltimore County Maryland/Baltimore County Horse Council Equestrian Program at the Agricultural Center, and AGREE to assume all of the obligations of this Release on the child's behalf.

I AGREE that "The Baltimore County Horse Council Equestrian Program" at the Agricultural Center and "Baltimore County Maryland" as used above includes all of their directors, instructors, employees, personnel and volunteers.

BY SIGNING BELOW, I AGREE to be bound by all applicable terms and provisions of this Release.

Signature:	Print Name:	
Emergency Contact:		
Parent/Guardian Signature (required if Rider is a minor)		
Print Name:		_
Child's Name:		_