

BITS & BRIDLES FARM

www.bitsandbridlesfarm.com

ENTRY FORM

Name: _____

Address: _____

Phone: _____

Horse: _____

Rider's Age: _____

Class(es) Entering: _____

Amount Paid (Cash or Check): _____

Rider's Signature

Date

Parent's Signature If Child Is Under 18

Date

EQUINE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

I hereby enter into this agreement in consideration of my ability and permission to ride, use or be present in the property, and horse owned by Bits & Bridles Farm, located at 93 Airline Road, South Dennis, MA 02660.

IMPORTANT NOTICE:

BY SIGNING THE AGREEMENT YOU ARE GIVING UP CERTAIN RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF YOUR RIDING OR USE OF THE OWNER'S HORSES AND/OR PARTICIPATION IN EQUINE ACTIVITIES AT BITS & BRIDLES FARM, INCLUDING INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF NEGLIGENCE OF YOU OR BITS & BRIDLES FARM, INCLUDING ITS AGENTS, EMPLOYEES, AND INVITEES. READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

By signing this form, I hereby acknowledge on behalf of myself that I have familiarized myself with the activities that I will be allowed to participate in, and that I do hereby acknowledge and agree that I will participate in these activities without restriction or limitation. I recognize the inherent risks involved in riding and working with horses including but not limited to:

- Bites, kicks, abrasions or contusions from horses
- Being thrown or bucked off by horses
- Scratches or other injury from stalls or enclosures
- Scratches or other injury from grooming tools and other equine equipment and tack.
- Allergic reactions to animals, hay, or other allergens
- Tripping in holes or on materials or equipment. Slipping, falling, or otherwise being injured in the barn, in stalls, or on the grounds, which can be slippery, muddy, wet, or contain or present other hazards

I hereby specifically forever waive and release Bits & Bridles Farm, Ro Nelson, the Town of Dennis and its principals and agents from any liability for injury arising out of the inherent risks from riding, working or participating in a stable environment and/or with horses as well as from the active negligence of Bits & Bridles Farm, its principals and agents. By signing this agreement I hereby acknowledge that although there may be supervision during any time spent at Bits & Bridles Farm, Ro Nelson, the Town of Dennis and its principals and agents. By signing this agreement I hereby acknowledge that although there may be supervision during my time spent at Bits & Bridles Farm, Bits & Bridles Farm, Ro Nelson, the Town of Dennis and its principals and agents bear no responsibility for my health or medical care.

I agree to indemnify, save and hold harmless Bits & Bridles Farm, Ro Nelson, the Town of Dennis and its principals and agents from and against any loss, liability, damage, attorney's fees or costs that they may incur arising out of or in any way connected with either my presence or participation at Bits & Bridles Farm or any acts or omissions of Bits & Bridles Farm, Ro Nelson, the Town of Dennis, its principals and agents. By signing this agreement and by signing below, I hereby acknowledge my complete understanding, agreement and consent to my presence and/or participation in the activities at Bits & Bridles Farm without restriction, without liability Bits & Bridles Farm, Ro Nelson, its principals and agents, and with full knowledge and understanding of the disclosures, waivers, and releases herein. If I am present at and participate in the activities of Bits & Bridles Farm I do so at my own risk. I hereby acknowledge and agree that Bits & Bridles Farm and/or any of its principals and agents shall bear no responsibility or risk associated with injuries that could arise from my presence or participation at Bits & Bridles Farm.

Name _____

Date: _____

Address: _____

Phone: _____

Participant's signature: _____

Parent/Guardian signature if participant is under 18 years of age: _____