



Gap Mountain Equestrian X-Country Schooling, LLC
POB 300, Troy, NH 03465 603-242-3695 gmexcs@gmail.com

RELEASE FORM

THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED IF YOU WISH TO PARTICIPATE IN THIS ACTIVITY.

Participant's Name (Please Print): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Number of horses I will be riding during activity (*If applicable*): _____

Level now riding (*Check one if applicable*):

Beginner Novice Training Preliminary Intermediate Advanced

Name of Activity/Schooling Show: _____

Date(s) to be held: _____ Location: Gap Mountain Road, Troy, NH

I have requested permission from Gap Mountain Equestrian X Country Schooling, LLC (the "LLC") to engage in equestrian and eventing activities at property located at Gap Mountain Road, Troy, New Hampshire. I agree that my participation is subject to the terms and conditions in this release, any additional conditions set by the LLC and, where applicable, to the *U.S. Equestrian Federation of Rules for Eventing*.

I agree to wear protective headgear when riding. When jumping I agree to wear protective headgear passing or surpassing the ASTM/SEI standards with harness attached that meets standards currently imposed by the *U.S. Equestrian Rules for Eventing*. I understand that the USEA mandates and the LLC strongly recommends that all riders participating in cross-country activity wear body-protecting vests that meet or exceed current USEF rules and the wearing of an approved medical armband.

I understand that the sport of eventing is a high risk sport, and that my participation in this equine activity is wholly at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the propensity of equines to behave in ways which may result in injury, harm or even death to humans or other animals around or near them; the unpredictability of equine reaction to sounds, sudden movements, smells, and unfamiliar objects; persons or other animals; hazards related to surface and subsurface conditions; collisions with other equines or objects; and, the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participant or others, including failing or inability to maintain control over the animal. By participating in this activity I agree to assume responsibility for those risks, and I hereby

release and agree to hold harmless the LLC and the owner of the property upon which the activities are conducted (the "Property Owner"), their officers, agents, employees and volunteers from any and all liability for negligence, and any and all manner of action and actions, cause and causes of action, suits, debts, judgments, executions, claims, liability, damages and demands, whatsoever, in law or in equity, resulting from or connected in any way with accidents, damage, injury or illness to myself and to my property, including the horse(s) which I may ride.

I understand and agree that the LLC and Property Owner do **NOT** extend any assurance that the premises are safe for engaging in equine activities.

I understand and agree that the LLC and Property Owner do **NOT** owe me a duty of care.

I understand and agree that the LLC and Property Owner do **NOT** assume responsibility for or incur liability for any injury to person or property resulting from the activities in which I intend to and will participate.

Signature: _____ Date: _____

(If participant is under 18, Release must be signed by Parent or Legal Guardian, not by trainer of instructor.)