

# **Bow Valley Riding Association**

Box 8028 Canmore, AB T1W 2T8

## **Waiver and Release of Liability**

In consideration of being allowed to participate in any way in the Bow Valley Riding Association activities, the undersigned acknowledge, appreciate and agrees that

1. The risk of injury from the activities involved in Horse related or Horse riding activities is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE BOW VALLEY RIDING ASSOCIATION, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. Horses can kick, bite, startle, stampede, buck, rear and strike causing possible injury or death to other horses or people in the immediate area, by understanding this fact of equine characterization, I knowingly and freely assume the risks associated with being around horses.

I HAVE READ THIS RELEASE OR LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

### **FOR PARTICIPANTS OF MINORITY AGE (under 18 years of age)**

This, is to certify that I, as parent/guardian with legal responsibility for this participant do consent and agree to his/her release as provided of all the Releasees and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Emergency Phone Number