

# Bit By Bit Stable, LLC

## AGGREEMENT AND LIABILITY RELEASE FORM

*Please read carefully before signing*

SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY. THE OPERATOR DOES NOT GUARANTEE YOUR SAFETY

I understand and agree that horseback riding is classified as rugged adventure recreational sport activity, and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. No horse is a completely safe horse. If a horse is frightened it may divert from its training and act according to its natural survival instincts which may include, but are not limited to: stopping short; changing direction or speed at will; shifting its weight from side to side; bucking; rearing; biting; kicking; or running from danger.

I AGREE THAT:I, for myself and on behalf of my child, have been fully warned and advised by this stable (132 Moxley Rd, Uncasville, CT)) that protective headgear which meets or exceeds the quality standards of the SEI CERTIFIED/ASTM STANDARD F 1163 Equestrian Helmet, must be worn while riding and I do understand that the wearing of such gear at these times may reduce severity of some of the wear's head injuries and possibly prevent the wear's death from happening as the result of a fall and other occurrences.

I AGREE THAT: Should emergency or any medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses.

I AGREE THAT:In consideration of this stable allowing my participation in this activity, under the terms set forth herein, I, the rider, for myself and on the behalf of my child, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release and discharge this stable, its owners, agents, employees, insurers, horse owners, and others acting on its behalf (hereinafter collectively referred to as "ASSOCIATES"), of and from all claims, demands, causes of action, and legal liability, whether the same be known or unknown, anticipated or unanticipated, due to this stable's and/or its associates' ordinary negligence; and I do further agree that except in the event of this stable's gross negligence and willful and wanton misconduct, I shall not bring any claims, demands, legal actions and wanton misconduct, I shall not bring any claims, demand, legal actions and causes of action, against this stable and its associates as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child in relation to the premises and operations of this stable, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of this stable, whether on or off the premises of this stable.

ALL RIDERS and parents/guardians of those riders under 18 must sign below after reading this ENTIRE Agreement.

I/We the undersigned have read and do understand the foregoing agreement and liability release.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Rider

\_\_\_\_\_  
Signature of rider or parent/guardian for rider under 18

\_\_\_\_\_  
Address

\_\_\_\_\_  
email address

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Cell Phone Number or Emergency Contact Number