

WAIVER AND RELEASE OF LIABILITY INDEMNIFICATION

I agree to release and discharge For the Love of Horses, Inc., and Equestrian Endeavors, LLC. its officers, members, representatives, employees and volunteers from any and all liability and claims arising out of or in any way connected with any activity operated by For the Love of horses, Inc., or Equestrian Endeavors, LLC. I assume all risks of injuries or damages on behalf of myself, which might occur as a result of any activity on the premises. This indemnification is to include and is not necessarily limited to all cost of litigation, medical expenses, judgment, or subrogation interests.

THE SIGNATURE BELOW INDICATES ACCEPTANCE OF THIS WAIVER AND RELEASE OF LIABILITY AND INDEMNIFICATION.

I ASSUME THE RISK OF EQUINE ACTIVITIES PURSUANT TO PENNSYLVANIA LAW

I HAVE READ AND UNDERSTAND THE WAIVER AND RELEASE OF LIABILITY INDEMNIFICATION

I do not have any limitations that may prevent me from performing or participating in any physical activities, or that may cause me any pain, strain discomfort or injury.

My signature below is also authorization for emergency medical (911) attention if needed. For which I assume all expense.

Signature _____ **Date** _____

Name: (print) _____

Address _____

Emergency Contact Information _____
