Equestrian Adventures of Florida Horseback Trail and Beach Rides Horse Riding Agreement and Liability Release Form This form must be completed by and for every participant Please read carefully before signing

SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY. THIS FACILITY AND/OR ANY INSTRUCTOR CONNECTED WITH IT DOES NOT GUARANTEE YOUR SAFETY OR THAT OF ANY HORSE.

Horseback Trail and Beach Rides will herein be known as and referred to as "HTR". In consideration for participating in horse-related activities, Training or instruction connected with HTR, the undersigned hereby agrees as follows:

- A. REGISTRATION OF RIDER AND PURPOSE OF AGREEMENT: I, the following listed individual hereinafter known as the "RIDER" and the parents or legal guardian thereof if a minor, do hereby voluntarily request and agree to participate in horse riding or horse instruction on and about HTR, and that RIDER will ride a horse provided to him or her by HTR, his or her own horse, or one borrowed or leased by RIDER's own arrangement, today and on all future dates.
- B. SCOPE OF AGREEMENT AND DEFINITIONS: This agreement shall be legally binding upon me, the RIDER, and the parents or guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and parental representatives. This agreement shall be interpreted according to the laws of the State of Florida. Any disputes by the RIDER shall be subject to paragraph K below and litigated in the county in which TBA is physically located. If any clause, phrase, or word is in conflict with the laws of the State of Florida then that single part is null and void. The term "HORSE" herein shall refer to all equine species. The term "RIDING" or "HORSEBACK RIDING" herein shall refer to riding, instruction in, or otherwise handling of or being near horses, ponies, mules, or donkeys whether from the ground or mounted. The term "RIDER" shall herein refer to a person who rides a horse or otherwise handles or comes near a horse from the ground. The terms "I", "me", and "my" shall herein refer to the above RIDER and the parents or legal guardians thereof if a minor.
- C. INHERENT RISK OF ACTIVITY: I understand that horseback riding is a rugged recreational activity and that there are numerous obvious and non-obvious inherent risks always present in such activities despite all safety precautions. As such, related injuries can be severe or even deadly and, at the least, can require more hospital days and result in more lasting residual effects than injuries from most other activities. Further this inherent risk is not only totally mitigated by either (1) the presence of an instructor or trainer or (2) by the use of a horse that has been used for or is considered unusable for the instruction of beginners. Horse accidents are common and, in fact, are virtually guaranteed to occur given enough time around horses. Horse accidents are even more common with beginners although expert riders are still subject to considerable (sometimes fatal) danger from participation in this activity.
- D. NATURE OF RIDING HORSES: I understand that HTR chooses its horses for their calm disposition and sound training as required for use as riding horses for our lesson programs yet, no horse is a completely safe horse. If a horse is frightened or irritated it may divert from any training it has received and act according to its natural survival instincts which may include but are not limited to: stopping short, changing directions or speed at will, shifting its weight, kicking, biting, running under obstacles or running from danger.
- E. RIDER RESPONSIBILITY: I understand that, notwithstanding the presence or participation of an instructor or trainer, upon mounting a horse and taking up the reins, the RIDER is in primary control of the horse. The RIDERS'S safety largely depends upon his or her ability to carry out simple instructions, and his or her ability to remain balanced aboard the moving animal (which is not easy for beginners). The RIDER shall be responsible for his or her own safety and that of an unborn child if the rider is pregnant. Pregnant women should ride horses only under the advice of their physician. HTR advises pregnant women not to ride horses. The RIDER will also be responsible for choosing to participate in HTR should there be any previous health condition that may hinder their riding ability and safety.

- F. CONDITIONS OF NATURE: HTR is not responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or otherwise react in some unsafe way. SOME EXAMPLES ARE: thunder, lightning, rain, wind, various changes in weather, wild and domestic animals, insects, or reptiles which may walk, run, fly near, bite and/or sting a horse or person. Further, HTR is not responsible for irregular or obstructed footing on groomed or wild land (including indoor or outdoor arenas, pens, or pastures), which is subject to constant change in condition according to use, weather, temperature, maintenance (or lack thereof) and natural and man-made changes in landscape. Further still, HTR is not responsible for activities engaged in by others such as, but not limited to, hunters {shooting guns for example), or car drivers or occupants (honking horns or throwing objects to scare a horse, for example).
- G. ACCIDENTAL AND PERSONAL LIABILITY INSURANCE: I agree that should medical treatment be required, I and/or my own accidental/medical insurance company shall pay for all such incurred expenses and deductibles. Should my actions or that of my horse cause injury or damage of any kind, I and/or my own personal liability insurance company shall pay for such damages. If the RIDER does not carry medical or personal liability insurance, it is the responsibility of the RIDER to pay for any and all medical expenses and/or damages incurred through participating in HTR.
- H. PROTECTIVE HEADGEAR WARNING: I agree that for myself and on behalf of my child and/or legal ward have been fully warned and advised by HTR that an ASTM/SEI approved helmet should be worn while riding and being near horses, and I do understand that the wearing of such headgear at these times may reduce the severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall and other occurrences.
- I. LIABILITY RELEASE: I agree that in consideration of HTR allowing my participation in this activity under the terms set forth herein, I the RIDER, for myself and on behalf of my child and/or legal ward or other parent, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release, and discharge HTR, its owners, agents, independent contractors, employees, offices directors, representatives, assigns, members, owners of premises and trails (whether or not such premises or trails are owned by HTR, affiliated organizations and insurers 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 your damage be known or unknown, anticipated or unanticipated that in any way related to any activities associated with HTR or on the premises; and I do further agree that I (including my child and/or legal ward or other parent, heirs, administrators, personal representatives or assigns) shall not bring any claims, demands, legal actions and causes of action, against HTR 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 or legal ward in relation to the premises and operations of HTR, to include while riding, handling, or otherwise being near horses owned by or in the care custody and control of HTR, whether on or off the premises of HTR.
- J. ATTORNEY'S FEES: I (on behalf of myself and my child and/or legal ward or other parent, heirs, administrators, personal representatives or assigns) agree that in consideration of HTR allowing my participation in this activity under the terms set forth herein agree to indemnify HTR and its Associates for all reasonable attorneys' fees and related costs incurred in defending themselves against any action taken or threatened by the Rider, the parents or guardians thereof, or his or her heirs, estate, assigns, including all minor children, and parental representatives. As much as we enjoy making our horse available to various riders (paying or otherwise), we respectfully request that if Rider believes that a horse-related personal injury or death is justifiable ground for shifting any part of the financial, emotional, and physical burdens of his or her injury (as onerous, regrettable, and/or tragic as they may be) back to HTR or its Associates, then please do not participate in this activity with our horses. We are only willing to have you as a participant if you accept the full and sole responsibility for any such injuries. If you did not, the cost to participate in HTR would be far in excess of the rates we charge and we are intentionally accepting a reduced rate because you are accepting the responsibility outlines above. Thank you.

ALL RIDERS AND PARENTS OR LEGAL GUARDIANS MUST SIGN BELOW AFTER READING THIS ENTIRE DOCUMENT:

SIGNER STATEMENT OF AWARENESS: I/WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT ARE TRUE AND ACCURATE.

ALL RIDERS MUST SIGN FOR THEMSELVES!

SIGNATURE RIDER #1/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #2/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #3/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #4/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #5/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #6/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
SIGNATURE RIDER #7/PARENT/GUARDIAN	RIDER'S PRINTED NAME	DATE
CONTACT PHONE NUMBER FOR GROUP:	() –	

I am releasing Equestrian Adventures of Florida fully for any and all responsibility of potential illness due to the COVID-19 pandemic. I attest to the best of my knowledge that I and my party:

*Am/are in good health.

*Have no symptoms of a cold, flu, or fever.

*Have not been in close proximity or contact with someone diagnosed or expressing symptoms of COVID-19.

*Have been given the recommendation to wear my face mask and gloves during my ride.

*I promise to respect the social distancing guidelines between parties.

I understand that Equestrian Adventures of Florida has made every effort to continue to offer horseback rides by taking every precaution to keep myself, my family, and other riders safe and healthy.

SIGNATURE

PRINT NAME

DATE