



RELEASE AND WAIVER OF LIABILITY AGREEMENT

Name _____

Phone (H) _____ (W) _____

Address _____

Cell _____ E-Mail _____

City / State/ Zip _____

Birth Date _____

As a condition of my involvement with any and/or all programs at MEYER SHOW HORSES/RHAPSODY IN BLUE and hereafter referred to only as MSH/RBS, as personnel, client, customer, participant, student, visitor, volunteer, applicant or instructor, I hereby represent to MSH/RBS as follows:

1. I am aware that being around horses and horseback riding is a dangerous activity that could result in serious injury or death.
____ (initials)
2. I acknowledge that MSH/RBS carefully chooses its horses with human safety being the primary concern. However, I understand that horses are unpredictable and potentially dangerous. I also acknowledge my personal risk and accept that risk.
____ (initials)
3. I agree to assume all risks associated with handling horses and horseback riding and to absolve MSH/RBS, its personnel, agents, and/or representatives from any liability for injury to me or my property.
____ (initials)
4. I have been fully informed and advised by MSH/RBS that I must wear an ASTM/SEI equestrian helmet while mounting, riding, dismounting and otherwise being around horses. I recognize that any head gear provided by MSH/RBS is a temporary courtesy and that proper fitting is not guaranteed. I further recognize and agree to obtain my own ASTM/SEI equestrian helmet as soon as possible.
____ (initials)
5. I agree to pay any losses incurred by MSH/RBS for damage to the person or property of others caused by me while riding or otherwise handling or dealing with horses.
____ (initials)
6. I am at least 18 years of age (OR if the parent or legal guardian of a minor that is a participant), I have reviewed these terms with my minor child.
____ (initials)

WARNING

Under Alabama law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to the Equine Activities Liability Protection Act.

I AGREE TO THE PROVISIONS ABOVE AND HAVE READ AND UNDERSTAND AND AGREE TO ALL OF THE GENERAL TERMS WHICH ARE PROVIDED TO ME AND PUBLISHED ON THE MSH/RBS WEBSITE AT www.winningarabians.com TO INDUCE MSH/RBS TO ALLOW ME TO BE INVOLVED IN ANY WAY WITH ANY PROGRAM WITH MSH/RBS, I AGREE TO BE BOUND BY THE "GENERAL TERMS". IF I FAIL TO COMPLY WITH THE TERMS OF THIS AGREEMENT OR CLAIM NOT TO BE BOUND BY THE TERMS OF THIS AGREEMENT BY REASON OF MINORITY STATUS OR OTHERWISE, I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS RHAPSODY IN BLUE, JONATHAN MEYER SHOW HORSES, PROPERTY AND/OR THE BUSINESS OWNERS, PARTNERS, AGENTS, ATTORNEY, PERSONNEL, SUCCESSORS, ASSIGNS AND/OR REPRESENTATIVES FROM ANY AND ALL LIABILITY OR LOSSES RESULTING FROM ANY SUIT AGAINST MSH/RBS BY MYSELF OR OTHERWISE RESULTING FROM A BREACH OF THIS AGREEMENT.

DATE _____

OWNER/APPLICANT _____

IF APPLICANT IS A MINOR:

I AM THE PARENT OR LEGAL GUARDIAN OF THE APPLICANT _____. I HAVE READ AND UNDERSTAND ALL OF THE TERMS OF THIS AGREEMENT, INCLUDING THE "GENERAL TERMS" PROVIDED TO ME AND PUBLISHED ON THE MSH/RBS WEBSITE AT www.winningarabians.com. TO INDUCE MSH/RBS TO ALLOW THE ABOVE APPLICANT TO BE INVOLVED WITH ANY PROGRAM AT MSH/RBS. AS AN EMPLOYEE, PARTICIPANT, STUDENT, VISITOR, VOLUNTEER, APPLICANT OR INSTRUCTOR, I AGREE TO BE BOUND BY THE "GENERAL TERMS". IF I FAIL TO COMPLY WITH THE TERMS OF THIS AGREEMENT OR CLAIM NOT TO BE BOUND BY THE TERMS OF THIS AGREEMENT BY REASON OF APPLICANT'S MINORITY STATUS OR OTHERWISE, I HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS RHAPSODY IN BLUE, JONATHAN MEYER SHOW HORSES, PROPERTY AND/OR THE BUSINESS OWNERS, PARTNERS, AGENTS, ATTORNEY, EMPLOYEES, SUCCESSORS, ASSIGNS AND/OR REPRESENTATIVES FROM ANY AND ALL LIABILITY OR LOSSES RESULTING FROM ANY SUIT AGAINST MSH/RBS BY MYSELF OR OTHERS OR OTHERWISE RESULTING FROM A BREACH OF THIS AGREEMENT.

DATE _____

PARENT/GUARDIAN _____

DATE _____

APPLICANT _____

RETURN COMPLETED FORM TO Rhapsody in Blue