

Tom Ordway
USEF Technical Delegate
208-875-0974



Horseback Riding Release

PARTICIPANT AGREES TO LOOK SOLELY TO INSURANCE, IF ANY, WHICH PARTICIPANTS MAY AT PARTICIPANT'S EXPENSE CARRY AND MAINTAIN, AND PARTICIPANT AGREES TO INDEMNIFY AND HOLD 100 ACRE WOOD FARM HARMLESS IN CONNECTION HEREWITH.

I/we understand that horseback riding is a high-risk sport and am/are participating at my/our own risk. I/We hereby release and hold harmless 100 Acre Wood Farm, Thomas D. Ordway, Debra K. McKinnon, farm employees and farm agents from all liability for accidents, damage, injury or illness to horses and participants using 100 Acre Wood Farm property and equipment.

REMARKS

Please state any problems or facts you feel 100 Acre Wood Farm should know to assist keeping you and your horse(s) happy and healthy (please continue on back of sheet if necessary):

This contract contains all of the terms and conditions agreed on by the parties hereto, and no other agreements, oral or otherwise, regarding the subject matter of his contract, shall be deemed to exist or to bind any of the parties hereto.

No alterations or variations in the terms of this contract shall be valid unless made in writing and signed by both parties hereto.

Date: _____ Signature _____
100 Acre Wood Farm Signature

Date: _____ Signature _____
Participant's Signature (Parent's Signature if under 18)

Participant/Parent Address

Participant/Parent Phone Number

Please read and understand the attached IDAHO EQUINE ACTIVITIES IMMUNITY ACT: TITLE 6 ACTIONS IN PARTICULAR CASES CHAPTER 18 EQUINE ACTIVITIES IMMUNITY ACT 6-1801.