Triangle H Farm, LLC

Release and Hold Harmless Agreement - Marcy Heepke, Triangle H Farm, LLC

WARNING!!!

IL Equine Liability Act – "Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities."

Whereas, the undersigned acknowledges the inherent risks of witnessing, observing, participating and engaging in equine activity including, but not limited to such activities as riding, training, assisting in medical treatment of, driving, or being a passenger upon an equine, whether mounted or unmounted, or assisting a participant, being in close proximity to or working around horses and understands the possibility of injury to both rider and horse in normal use or in competition or schooling, and

The undersigned is aware of the risks of engaging in equine activities (as specified above and in the Illinois Equine Liability Act,) including, but not limited to:

1. The propensity of an equine to behave in dangerous ways that may result in the injury, harm, or death to the participant.
2. The inability to predict an equine's reaction to sound, movement, objects, persons, or animals.
3. The hazards of surface or subsurface conditions.
4. Collisions with other equines or objects, and
5. The potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within his or her ability.

In consideration, therefore, for the privilege of riding and/or working around horses at Triangle H Farm or any other property owned by the Stable or Heepke family, or any property adjoining, the undersigned does hereby agree to **hold harmless and indemnify Marcy Heepke/ Triangle H Farm, LLC**, their agents, employees and staff, and further releases them from any liability or responsibility for accident, damage, injury, including death, or illness to the undersigned or to any property or to any horse owned by the undersigned or to any family member or spectator accompanying the undersigned on the premises of Triangle H Farm, LLC. The participant further agrees to be personally responsible for own medical expenses and agrees this release shall continue in perpetuity and remain in full force without the necessity of an additional release regardless of rider's ability or progression. Additional further release from liable from presence on the property for participants and their guests and agree if any claim is to be made that it must be brought in Madison County, Illinois.

In addition, permission is given allowing the farm to photograph and to allow those photographs use in farm publicity and advertising.

Circle One (or more): Lesson Student Boarder Guest Show Clinic

Date: _____

_____ _____

Printed Name of Participant Signature of Participant

_____

Address City, State, Zip

_____

Phone Number (s) E-Mail Address

_____ _____

Printed Name of Mother or other Guardian (if under 18) Signature of Mother or other Guardian (if under 18)

_____ _____

Printed Name of Father or other Guardian (if under 18) Signature of Father or other Guardian (if under 18)