



CEDAR CREST COUNTRY COTTAGE AND STABLES L.L.C.

P.O. Box 621, Cedar Crest, NM 87008 • Phone 505-281-5197

Please Check The Appropriate Box:

BEGINNER

INTERMEDIATE

ADVANCED

RELEASE OF LIABILITY AND USER INDEMNITY AGREEMENT

I, _____ hereby acknowledge that I have voluntarily applied to participate in the sport of HORSEBACK RIDING at **CEDAR CREST COUNTRY COTTAGE AND STABLES**. (Please initial to show that you agree _____.)

I understand that horseback riding and all other hazards and exposures connected with the activities conducted in the outdoors, do involve risk, and I am cognizant of the risks and dangers inherent in these activities. I and/or my family, including minor children, are fully capable of participating in the activities undertaken and willing assume the risk of injury as my responsibility, including loss of control, collisions with other participants, trees, rocks and other man made or natural obstacles, whether they are obvious or not.

I understand and agree that any bodily injury, death or loss of personal property and expenses thereof as a result of my negligence of my family participating in horseback riding or related activities are my responsibility.

I understand that accidents or illness can occur in remote places, without medical facilities or physicians, and I do hereby agree that I and/or my family (including minor children) are in good health with no physical defects that might be injuries to me and to animals, walking, riding, and all and any similar conditions associated with outdoor activities. (Please initial to show that you agree _____.)

I understand that any route or activity chosen as a part of our outdoor adventure may not be the safest but has been chosen for its interest and challenge. Since horses will be used, I and/or my family understand that a horse, irrespective of its training and usual past behavior and characteristics, may act or react unpredictably at times based upon instinct or fright which likewise, is an inherent risk to be assumed by each participant in the activity. (Please initial to show that you agree _____.)

As lawful consideration for being permitted by **CEDAR CREST COUNTRY COTTAGE AND STABLES** to participate in horseback riding I do hereby release of any legal liability **CEDAR CREST COUNTRY COTTAGE AND STABLES**, its owners and employees, for any and all injury or death caused by or resulting from my participation whether or not such injury or death was caused by their negligence or any other cause. (Please initial to show that you agree _____.)

I further agree not to sue, claim against, attach the property or prosecute **CEDAR CREST COUNTRY COTTAGE AND STABLES**, its owners or employees, for any injury or death caused by their negligence or from any other cause. (Please initial to show that you agree _____.)

I agree to defend, indemnify and hold harmless **CEDAR CREST COUNTRY COTTAGE AND STABLES**, its owners and employees for any injury or death caused by or resulting from my and/or my family's participation in horseback riding, whether or not such injury or death was caused by their negligence or from any other cause. (Please initial to show that you agree _____.)

This contract shall be legally binding upon me, my heirs, my estate, assigns, legal guardians and my personal representatives. (Please initial to show that you agree _____.)

I have carefully read the agreement and fully understand its contents. I am aware that I am releasing certain legal rights that I otherwise may have and I enter into this contract on behalf of myself and/or my family of my own free will. (Please initial to show that you agree _____.)

I understand that any reference to **CEDAR CREST COUNTRY COTTAGE AND STABLES** also refers to its owners, employees, heirs and/or assigns.

This is a Release of Liability

Do not sign or initial the release if you do not understand or do not agree with its terms.

Under 18 years of age, signature of Parent or Guardian is required.

Parent or Guardian _____

User/Participant _____

Witness of Signature _____

Date: _____