

LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT (FOR INDIVIDUALS)

Horse Trail Rides, LLC (STABLE / OPERATOR NAME hereinafter know as "THIS STABLE")

512 Meadow Road, Ferguson, NC 28624 (Location or Address of THIS STABLE)

READ CAREFULLY AND COMPLETE ALL SECTIONS BEFORE SIGNING

WARNING – UNDER NORTH CAROLINA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING EXCLUSIVELY FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. CHAPTER 99 OF THE NORTH CAROLINA GENERAL STATUTES, REGISTRATION OF PARTICIPANT AND AGREEMENT PURPOSE I. the following listed individual, and the parents or legal guardians thereof if a minor do hereby voluntarily agree to participate in horse rental services and / or equestrian services and / or guide and outfitter services provided by THIS STABLE.

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A. REGISTRATION OF PARTICIPANT AND AGREEMENT PURPOSE I. the following listed individual, and the parents or legal guardians thereof if a minor do hereby voluntarily agree to participate in horse rental services and / or equestrian services and / or guide and outfitter services provided by THIS STABLE.

Table with 4 columns: PARTICIPANT NAME, AGE (if under 18), WEIGHT (Are you less than 225 lbs), HORSE RIDING EXPERIENCE (check one that applies). Includes questions 6 and 7 regarding physical conditions and special needs.

B. AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS This agreement shall be legally binding upon me the registered participant, and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and it shall be interpreted according to the laws of the state and county of THIS STABLE's physical location.

C. INHERENT RISKS / ASSUMPTION OF RISKS I ACKNOWLEDGE THAT: Horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORT ACTIVITY and that risks, conditions, and dangers are inherent in (meaning an integral part of) horse / equine / animal activities, regardless of all feasible safety measures which can be taken, and I agree to assume them.

D. WILDERNESS EXPERIENCE PARTICIPATIONS, CONDITIONS OF NATURE WARNING, UNFAMILIAR AND SUDDEN SIGHTS, SOUNDS AND MOVEMENTS WARNING, AND INSPECTION OF PREMISES I / WE ACKNOWLEDGE THAT: The participant may be taking part in a "WILDERNESS EXPERIENCE" that may be hazardous to people.

elements of nature and / or sudden and / or unfamiliar sights, sounds and / or sudden movements that can scare a horse, cause it to fall, or react in some other unsafe way. SOME EXAMPLES ARE: Thunder, lightening, rain, wind, wild and domestic animals, insects, reptiles, which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape. I also acknowledge that these are just some of the risks and I agree to assume others not mentioned above. I am not relying on this stable to list all possible conditions for me. The participant and parent or legal guardian have inspected THIS STABLE's facilities and are satisfied that all premise conditions are reasonably safe for the participant's intended purpose, usage and presence upon THIS STABLE's premise.

E. **CARRY-ON OBJECTS WARNING AND SHARP, LOUD NOISES WARNING I / WE ACKNOWLEDGE THAT:** When approaching, mounting and riding horses, I must not carry loose items that may fall or blow away or flap in the wind or bounce or make sharp or loud noises, the action of which may scare horses causing them to react in unsafe ways. SOME EXAMPLES ARE: Cameras, cell phones, hats not securely fastened under chin, toys, & purses. When near or riding a horse, participants must not make sharp or loud noises, such as whistling or screaming or yelling, the sound of which may scare horses causing them to react in unsafe ways.

F. **SADDLE GIRTH LOOSENING WARNING I / WE ACKNOWLEDGE THAT:** Saddle girths (Fastener straps around the horse's belly) may loosen during riding. Riders must alert the nearest attendant of any girth looseness so action can be taken to avoid saddle slippage and the potential for the rider to fall from the horse.

G. **PROTECTIVE HEADGEAR / HELMET WARNING AND OFFERING:** I / WE AGREE THAT: I for myself and on behalf of my child and / or legal ward have been fully warned and advised by THIS STABLE that protective headgear / helmet, which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet, should be worn while riding, handling, and / or being near horses, and I understand that the wearing of such headgear / helmet at these times may reduce 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 / WE ACKNOWLEDGE THAT:** THIS STABLE has offered me, and my child and / or legal ward if applicable, protective headgear / helmet that meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet. **I / WE ACKNOWLEDGE THAT:** Once provided, if I choose to wear the protective headgear / helmet offered that I / WE will be responsible for properly securing the headgear / helmet on the participant's head at all times. I am not relying on THIS STABLE and / or its associates to check any headgear / helmet or headgear / helmet strap that I may wear, or to monitor my compliance with this suggestion at any time now or in the future.

H. **THIS STABLE'S PROTECTIVE HEADGEAR / HELMET POLICY:** I understand and agree that THIS STABLE requires riders to wear ASTM standard f 1163 Protective headgear / Helmet according to the following requirements.

<u>Rider Age</u>	<u>Protective Headgear / Helmet Requirement</u>
2 – 4 Yrs and Younger	Must wear the protective headgear / helmet. Accompanied by guardian who walks beside equine.
4 Yrs through 15 Yrs	Must wear the protective headgear / helmet.
16 & 17 Yrs	Must wear the protective headgear / helmet.
18 Yrs and Older	Must wear the protective headgear / helmet.

J. **LIABILITY RELEASE I AGREE THAT:** In consideration of THIS STABLE allowing my participation in this activity, under the terms set forth herein, I for myself and on behalf of my child and / or legal ward, heirs, administrators, personal representatives or assigns, do agree to release, hold harmless, and discharge THIS STABLE, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, affiliated organizations, and Insurers, and other acting of their behalf (herein collectively referred to "Associates"), of and from all claims, demands, causes of action and legal liability, whether the same be known or unknown, anticipated or unanticipated due to THIS STABLE's and / or ITS ASSOCIATE'S, ordinary negligence or legal liability; and I do further agree that except in the event of THIS STABLE's gross negligence and / or willful and / or wanton misconduct, I shall not bring any claims, demands, legal actions and causes of action, against THIS STABLE and ITS ASSOCIATES as stated above in this clause, for any economic and non-economic losses due to bodily injury and / or death and / or property damage, sustained by me and / or my minor child or legal ward in relation to the premises and operations of THIS STABLE, to include while riding, handling, or otherwise being near horses owned by me or owned by THIS STABLE, or in the care, custody or control of THIS STABLE, whether on or off the premises of THIS STABLE, but not limited to being on THIS STABLE's premises.

K. **EQUINE ACTIVITY LIABILITY ACT (EALA) WARNING OR LANAUAGE:** (This clause applies only for operations located in these states: AL, AZ, CO, DE, FL, GA, IL, IA, IN, KY, KS, LA, ME, MA, MI, MS, MO, NE, NC, OH, OK, OR, RI, SC, SD, TX, TN, UT, VA, VT, WV and WI.) I acknowledge that I have reviewed this state's EQUINE ACTIVITY LIABILITY ACT WARNING OR LANAUAGE, a copy of which is attached hereto and incorporated as if fully set forth herein. **Each Participant and Parents or Legal Guardians must sign below after reading and completing this entire document.**

SIGNER STATEMENT OF AWARENESS
I / WE UNDERSTAND, REPRESENT THAT I / WE HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT. I / WE UNDERSTAND THAT BY SIGNING THIS DOCUMENT I / WE AM GIVING UP RIGHTS TO SUE TODAY AND IN THE FUTURE. I / WE ATTEST THAT ALL FACTS ARE TRUE AND ACCURATE. I AM SIGNING THIS WHILE OF SOUND MIND AND NOT SUFFERING FROM SHOCK, OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS.

SIGNATURE OF PARTICIPANT (Spouses must sign for themselves)	DATE
SIGNATURE OF PARENT, GUARDIAN AND / OR SPOUSE #1 & #2	DATE
Address in Full: _____	
Home Phone #: _____ Business Phone #: _____	
EMERGENCY CONTACT: _____ RELATIONSHIP: _____ PHONE #: _____	

I understand that "This Stable and its Associates includes "Leatherwood Mountains" and shall include Leatherwood Rentals, Inc., Leatherwood Home and Land Sales LLC, Horse Trail Rides LLC, Phil & Phil LLC, Leatherwood Mountains Resort LLC, Leatherwood Mountains Property Owners Association, Snotsteep LLC, Keith Johnston, Sharon Schmid, Wood Glen Apartments phase 1, Wood Glen Apartments phase 2, all owners, managers, agents, employees or anyone affiliated with Leatherwood and/or their activities. As used herein "I" or "Undersigned" shall include my family members, my guests and invitees and my minor children.