



## HUACHUCA SADDLE CLUB RELEASE FOR CALENDAR YEAR 2024

In consideration of being allowed to participate in equestrian activities put on by Huachuca Saddle Club, The undersigned acknowledges, appreciates, and agrees that:

1. The risk of injuries from activities involved in these various programs is significant, including the potential for permanent disability and death, and,
2. ***I knowingly and freely assume all such risks.*** Both known and unknown, even arising from the negligence of the releases or others, and assume full responsibility for my participation, and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual and significant concern in my readiness for participation and or for the program itself, I will remove myself from participation and bring such to the attention of the nearest officials immediately, and,
4. I, for myself and on behalf of my/our heirs, assigns, personal representatives, and next of kin, **HEREBY RELEASE** the Huachuca Saddle Club and any arena or venue, their officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors of premises used to conduct the event (“RELEASES”) **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE,** to the fullest extent permitted by law.
5. I, for myself and on the behalf of my/our heirs, assigns, personal representatives, and next of kin, **HEREBY INDEMNIFY AND HOLD HARMLESS** all of the above Releases from any and all liabilities incident to my involvement or participation in these programs, **EVEN IF ARISING FROM THEIR NEGLIGENCE,** to the fullest extent permitted by law.
6. In participating I am permitting Huachuca Saddle Club to use the rider’s picture, name, or voice on any media for the purpose of advertising or sponsorship.
7. This release is in effect for the calendar year of 2024 for any and all Huachuca Saddle Club sponsored events.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2024

Signature: *(if under 18, signature of parent or guardian)* \_\_\_\_\_

Rider’s Printed Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ *e-mail address:* \_\_\_\_\_

**PLEASE READ ARS 12-553 LIMITED LIABILITY OF EQUINE OWNERS: EXCEPTIONS: ADDED BY LAW 1994, CH. 259 OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT.**