

**WILDWOOD FARM and  
THE PACIFIC NORTHWEST RIDING ACADEMY  
RIDING INSTRUCTION/CAMPS/PONYRIDES**

**RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT**

**RECITAL.** I, the undersigned Participant, desire to participate in using riding, exhibiting or other involvement with horses, and/or in other activities conducted at or from Wildwood Farm, LLC and through The Pacific NW Riding Academy (PNWRA), 2326 Happy Valley Road, Oak Harbor, Washington 98277. As part of the consideration for such participation, and to induce Wildwood Farm and PNWRA to allow me to participate, I have agreed to this Release of Liability and Hold Harmless Agreement. This Release of Liability and Hold Harmless Agreement will apply to my participation in such activities on any date on or after the signature date indicated below, unless and until I give formal written notice to Wildwood that I will no longer be bound by this Release of Liability and Hold Harmless Agreement (in which case I understand that I may not be permitted to participate in any further activities).

**ACKNOWLEDGMENT OF RISK.** I understand that there are substantial risks and dangers inherent in keeping, training, transporting, approaching and riding horses, and related equestrian activities, both to myself and third parties. I realize that dangers may arise at any time, anticipated or unanticipated, including without limitation dangers to my life and the lives of third parties from the unpredictable nature of horses and from other causes such as acts or omissions of other riders, trainers, or other persons. I voluntarily assume all risks and danger of injury, death, harm and/or damage to my person or my property and that of third parties, resulting from or arising out of conditions at or about the Wildwood Farm premises and any trails or other areas accessible from such premises, or any of my activities on, at, or from such premises and trails and other areas, including all use, riding, transportation, or exhibition of any horse at Wildwood Farm, or arising out of the treating, inherent in keeping, training, transporting, approaching, and riding vetting, shoeing or trimming, or other services to any horse, or arising out of the escape of any horse at or from Wildwood Farm, theft of any horse or property, or any other cause whether or not in Wildwood Farm or PNWRA's control. I accept full responsibility for all medical expenses incurred as a result of any of the foregoing.

**ASTM APPROVED PROTECTIVE HEADGEAR IS REQUIRED:** I agree to wear protective headgear which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet. I understand that it will be worn by all RIDERS under the age of 18 while riding and being near horses and I do understand that the wearing of such headgear at these times may reduce the 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.

( ) PROTECTIVE HEADGEAR ACCEPTANCE: I/WE request to wear protective headgear which Instructor provides

( ) PERSONAL PROTECTIVE HEADGEAR: I/WE will provide MY/OUR own headgear  
I/WE accept full responsibility for MY/OUR safety in this decision

( ) PROTECTIVE HEADGEAR REFUSAL: I/WE refuse to wear any type of protective headgear  
I/WE accept full responsibility for MY/OUR safety in this decision

**RELEASE, HOLD HARMLESS, WAIVER, PLEDGE.** I further release, discharge and agree to indemnify and hold harmless Wildwood Farm and PNWRA, its owners, manager, agents, officers, employees, contractors, veterinarians and farriers, and successors of the foregoing, to the fullest extent allowed by law, from any claim, suit, expense or loss which arises out of my participation in activities at (or the use of) the premises of Wildwood Farm or any trails or other areas accessible therefrom, stabling of horses at Wildwood Farm, my involvement in use, care, handling, approaching, riding, pasturing, transportation or exhibiting of any horses (including without limitation any horses or equipment or tack that may be provided by Wildwood Farm & PNWRA), or the condition of the premises, horses, equipment or tack at Wildwood or any trails or other areas accessible therefrom, except to the extent resulting from any act or omission of a Wildwood Farm or PNWRA employee, agent or contractor that constitutes a willful or wanton disregard for safety. I further waive and release subrogation claims of all medical, disability, property and liability insurers, including, but not limited to damage resulting from medical and convalescent care, and cost of support; and, as security for this Release and Hold Harmless, I grant and pledge a security interest in all money and proceeds arising from any claim therefor, including insurance proceeds, trust and guardianship, remainders and proceeds from testate or intestate succession, which I agree not to relinquish or disclaim.

**SADDLE GIRTHS/NATURAL LOOSENING:** I understand that saddle girths (saddle fasteners around a horse's belly) may loosen during a ride. If a rider notices this, he/she must alert the riding instructor as quickly as possible so action can be taken to avoid slippage of saddle and a potential fall from the animal.

**SUPPLEMENT TO STATUTORY LIMITATIONS OF LIABILITY.** I understand that Wildwood Farm's liabilities as an equine activity sponsor are limited by Washington State law, at RCW 4.24.540 and otherwise, and I intend Wildwood Farm's and PNWRA's rights under this Release of Liability and Hold Harmless to be in addition to those statutory limitations and not as a replacement for them.

**MEDICAL CONDITIONS DISCLOSED.** I agree to disclose any medical conditions that might impact my ability to ride and/or the ability of my instructor to assist in case of an emergency. These conditions include but are not limited to: back injuries, hip or knee replacements, heart conditions or allergies. If you have any medical conditions please note them on page 3 of this form.

BY MY SIGNATURE, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE FOREGOING RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT AND HAVE AGREED TO IT VOLUNTARILY, INTENDING TO BE LEGALLY BOUND.

**EACH INDIVIDUAL PARTICIPANT MUST SIGN A SEPARATE FORM**

Date Signed: \_\_\_\_\_

Printed Name of Participant: \_\_\_\_\_

The Participant is (check one):

18 years of age or older:

Under 18 years of age:

Signature if over 18: \_\_\_\_\_

**ADULT MUST COMPLETE THE FOLLOWING FOR/AS PARTICIPANT:**

Printed Name of adult Guardian \_\_\_\_\_

Relationship to participant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

**IF PARTICIPANT IS UNDER AGE 18 PARENT OR ADULT GUARDIAN MUST COMPLETE AND AGREE TO THE FOLLOWING**

**Parent/Guardian:** If the Participant named on the prior page is a minor, I, the undersigned Parent or Guardian, am signing this Release of Liability and Hold Harmless Agreement individually and on behalf of the Participant and (unless I am single) my Marital community. I verify that I am the parent or guardian of the minor Participant and I have authority to enter into this Release of Liability and Hold Harmless Agreement on behalf of the Participant and my marital community, if any. I agree to indemnify and hold harmless Wildwood Farm and PNWRA, its owners, manager, agents, officers, employees, contractors, veterinarians and farriers, and successors of the foregoing, to the fullest extent allowed by law, from any claim, suit, expense or loss which arises out of the minor's participation in activities at (or the use of) the premises of Wildwood Farm or any trails or other areas accessible therefrom, stabling of horses at Wildwood Farm, the minor's involvement in use, care, handling, approaching, riding, pasturing, transportation or exhibiting of any horses (including without limitation any horses or equipment or tack that may be provided by Wildwood Farm), or the condition of the premises, horses, equipment or tack at Wildwood Farm or any trails or other areas accessible therefrom, except to the extent resulting from any act or omission of a Wildwood Farm or PNWRA employee that constitutes a willful or wanton disregard for safety. I accept full responsibility for all medical expenses incurred as a result of any of the foregoing.

I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING, AND THAT BY SIGNING THIS RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT ON BEHALF OF THE MINOR PARTICIPANT, I AND MY MARITAL COMMUNITY AND THE MINOR AGREE TO BE BOUND BY ITS TERMS.

Parent/Guardian's Signature \_\_\_\_\_

Parent/Guardian's printed name: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**MEDICAL CONDITION DISCLOURE.** The Participant listed on this form has the following medical conditions that we would like to advise Wildwood Farm and their agents/instructors of: