

KDM DRESSAGE  
Release of Liability Form  
And  
Agreement

Name:

Date of Birth:

Address:

Phone:

Email:

Horse name:

Lesson/training agreement: Single lessons \_\_\_\_ Half training: \_\_\_\_ Full training: \_\_\_\_

\*please note 30 day written notice is required for termination of lesson/training agreement

\_\_\_\_ (INITIAL)

**LIABILITY RELEASE:** I understand that this is a high risk sport and that I am participating at my own risk. I hereby assume this risk and further do hereby release and hold harmless KDM Dressage, and its agents, employees, volunteers, and the owners and managers of the property on which the equestrian activity is held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse (s) I will ride at this facility.

**RELEASE, ASSUMPTION OF RISK, WAIVER AND IDEMNIFICATION:**

*This document waives important legal rights, please read carefully before signing.*

**I AGREE** that I choose to participate voluntarily in equestrian activities. I represent that have the requisite abilities to safely participate in the equestrian activities. I am fully aware and acknowledge that horses sports involve inherent dangerous risk to accident, loss, and serious bodily injury, including broken bones, traumatic brain injuries, trauma, pain, suffering, or death (“harm”)

**I AGREE** to release KDM Dressage and its agents, employees and volunteers from all claims or money damages, or otherwise for any Harm to me of my horses and for any Harm caused by me or my horse to others, even if the Harm resulted directly from the

negligence of the equestrian facility.

**I AGREE** to indemnify (to pay any losses, damages, or costs incurred) by KDM Dressage, the property owners, and their respective agents, employees, and volunteers; and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse at this facility.

I acknowledge that I am entitled to wear protective equipment, and I acknowledge that KDM DRESSAGE strongly encourages me to do so. However, WARNING that no protective equipment can guard against all injuries.

As a parent or guardian of a minor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations to this RELEASE on the child's behalf.

**BY SIGNING BELOW, I AGREE** to be bound by all applicable terms and provisions of this Release of Liability Form

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Required if the rider is under 18 years of age)

Emergency contact: \_\_\_\_\_