

VOLUNTEER RELEASE: Big Sky Farm, 1/15/2023 LAST NAME: _____

WARNING

Under North Carolina law, an equine activity sponsor or equine professional is not liable for any injury to anyone engaged in equine activities.

Assumption of Risk, Hold Harmless and Waiver

I, the undersigned, assume the unavoidable risks inherent in horse related activities, including but not limited to bodily injury and physical harm to horse, rider, volunteer and spectator. In

consideration of my use, enjoyment, participation and/or observation of a horse related activity the undersigned acknowledges and accepts the following:

Equine activities involve inherent dangerous risks of loss and accident, including bodily and personal injury, death, and property damage to participants, bystanders, horses and pets. Horses are large and unpredictable animals. Risks of and from equine activities can involve sudden, unexpected and unforeseen occurrences.

I thereby release, waive and forever discharge The Moore County Driving Club, Big Sky Farm, their owners, their officers, directors, employees, volunteers, and agents from any and all claims, demands, actions and rights of action of whatever kind or nature, in law or in equity, know or unknown, arising from or related to any bodily personal injuries, death or property damage arising from or related to the horse related activity conducted by The Moore County Driving Club.

I am acquainted with appropriate equestrian safety practices. It is not the responsibility or obligation of The Moore County Driving Club to teach or advise me of appropriate equestrian safety practices.

This Assumption of Risk, Hold Harmless and Waiver is given on behalf of me, my spouse, legal representatives, administrators, executors, heirs, assigns and any child of whom I am a parent or guardian, their legal representatives, administrators, executors, heirs and assigns.

If any portion of this Assumption of Risk, Hold Harmless and Waiver is held to be invalid by any court or other governing body, the remainder shall continue in full force and effect.

I affirm that I have fully read and understand the meaning of this waiver and hold harmless agreement.

1. Signature of Volunteer: _____

Address: STREET _____

TOWN _____ STATE _____ ZIP _____

Printed Name: _____ Date: _____

2. Signature of Volunteer: _____

Address: STREET _____

TOWN _____ STATE _____ ZIP _____

Printed Name: _____ Date: _____

3. Signature of Volunteer: _____

Address: STREET _____

TOWN _____ STATE _____ ZIP _____

Printed Name: _____ Date: _____
