

ABANC

**2020 Extravaganza Waiver of Liability and Assumption of Risk**

I have been advised of and fully recognize the risks and dangers involved with the showing of alpacas at a public show, and fully assume the risk associated with such activity, including the possibility of injury, illness or damage to my property, my alpacas or me. I THEREFORE, IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE ABANC ALPACA EXTRAVAGANZA, SCHEDULED FOR BOULDER COUNTY FAIRGROUNDS, LONGMONT, COLORADO, ON February 22 & 23, 2020 (“THE SHOW”), AND BINDING MYSELF, MY HEIRS, COMPANIES, EXECUTORS, RELATIVES, ADMINISTRATORS, ASSIGNS, AND SUCCESSORS IN INTEREST, FULLY RELEASE, DISCHARGE, AND CONVENANT NOT TO SUE THE ORGANIZERS OF THE SHOW, ITS EMPLOYEES OR AGENTS, AND ALL OTHER PARTICIPANTS IN THE SHOW (“THE RELEASEES”) FROM ANY AND ALL LIABILITY FOR LOSS OR DAMAGE AND ANY CLAIMS FOR DAMAGES ON ACCOUNT OF INJURY TO PERSON, ANIMAL OR PROPERTY OF THE UNDERSIGNED, ARISING OUT OF OR RELATING TO THE SHOW. I reserve only and do not waive or release claims for intentional misconduct. I agree to be contractually bound by this release and waiver, and should anyone bring or assert any claim in contravention of this waiver, such person(s) shall be liable for all expenses, including attorney’s fees, incurred by the Releasees, in defense thereof. IT IS MY INTENTION THAT THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNIFICATION AGREEMENT BE AS BROAD AND INCLUSIVE AS THE LAWS OF THE STATE OF COLORADO PERMIT.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT BY SIGNING IT I HAVE GIVEN UP SUBSTANTIAL RIGHTS AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY ASSURANCE, INDUCEMENTS OR GUARANTEES MADE TO ME.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Ranch Name

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

Checked by veterinarian: Name of animal and ARI #

- \_\_\_\_ 1) \_\_\_\_\_
- \_\_\_\_ 2) \_\_\_\_\_
- \_\_\_\_ 3) \_\_\_\_\_
- \_\_\_\_ 4) \_\_\_\_\_
- \_\_\_\_ 5) \_\_\_\_\_
- \_\_\_\_ 6) \_\_\_\_\_
- \_\_\_\_ 7) \_\_\_\_\_
- \_\_\_\_ 8) \_\_\_\_\_
- \_\_\_\_ 9) \_\_\_\_\_
- \_\_\_\_ 10) \_\_\_\_\_

Please **complete** (except for veterinarian check) **prior to checking in.**