



RELEASE OF LIABILITY, WAIVER AND ASSUMPTION OF RISK AGREEMENT

ALPHA DRESSAGE ASSOCIATION, INC.

I, the undersigned, voluntarily wish to participate in Alpha Dressage Association, Inc. ("Alpha") events that occur on and between 12/1/2025 and 11/30/2026 and understand that this release, waiver and assumption of risk will be in effect during the entire identified time period and for all locations of Alpha events whether or not I sign any additional releases. I understand that during portions of these events I will be in close proximity to one or more horses under circumstances which may expose me to some risk of injury, because of the nature of horses, the facility and the activities in which I will be engaged. Knowing these risks, I hereby agree to assume these risks and to release and hold harmless all of the persons or entities mentioned in this release. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs, executors, representatives, and assigns.

In consideration of Alpha allowing my participation in and/or presence at any event, I, on behalf of myself and my heirs, administrators, personal representatives, assigns, children and spouse, if any, do hereby agree to hold harmless, release and discharge Alpha, which includes its officers, directors, members, agents, representatives, affiliates and insurers, of and from all claims, demands, causes of action and legal liability whether known or unknown, anticipated or unanticipated, due to the ordinary negligence of Alpha. I shall not bring any claims, demands, legal actions or causes of action against Alpha for any damage or loss due to bodily injury, death or property damage arising out of my participation in these events. I am aware that an equine activity sponsor or an equine professional shall not be liable for an injury to or the death of a participant engaged in an equine activity.

Approved helmets MUST be worn by all riders while mounted. Riders under the age of 18 years must be accompanied by an adult while attending an Alpha Dressage event.

I hereby consent to and authorize the taking of and use and reproduction by Alpha of any and all photographs and any other audiovisual materials taken of me, my child/ward, and/or horse for any use for the benefit of Alpha and its activities and members.

I have carefully read this document in its entirety, understand all of its terms and conditions, and know it contains an assumption of risk, release and waiver from liability, as well as hold harmless and indemnification obligations.

FLORIDA WARNING

Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

Printed Name of Participant

Date

Signature of Participant or of Parent or Guardian
(if participant is a minor)

Date