VALLEY VIEW EQUINE RELEASE AND WAIVER OF LIABILITY

(GROOMS, TRAINERS, STABLE HANDS)

As	a	condition	for	allowing	me	to	work	as	a		(position)	with
				(name	of sta	bles)	(the "St	able'	') an	d to engage in activitie	s involving h	orses
own	ed b	y or boarde	d at tl	ne Stable, in	ıcludi	ng h	andling,	trair	ning,	riding of such horses,	or any other	r duty
arisi	ng 1	from my em	ployn	nent with th	e Sta	ble v	which ma	ay pı	ut m	e into close proximity	with one or	more
hors	es, l	agree to the	follo	wing Releas	se and	l Wa	iver of L	iabil	ity.			

By signing this document, I acknowledge that I understand that due to the unpredictable nature of horses, riding or interacting with horses can be a dangerous activity which involves inherent risks, known and unknown, that may cause serious bodily injury and even death. I understand that any horse, regardless of its training or past behavior, may buck, rear, bite, kick, fall, stumble, run, spook, jump an obstacle, or step on or push a person, at any time and without warning or apparent cause. I further acknowledge and understand that riding equipment such as saddles and bridles may loosen or break, which may result in the rider being jolted or falling off the horse, causing injury or even death. I also understand that these are just some of the risks, and I agree to assume others. I am not relying on the Stable to list all possible equine-related risks for me.

By signing this document, I certify that I am fully capable of engaging in the activities required by my employment with the Stable. I acknowledge that I am voluntarily assuming the risk and the danger of serious bodily injury and death inherent in the handling, training, riding and interaction with and of the horses owned by or boarded at the Stable, including the risks associated with the use of the riding equipment.

I hereby, for myself and my personal representatives, assigns, heirs and next of kin, release, waive, discharge and covenant not to sue the Stable, its employees, managers and representatives from all liability with respect to any loss or damage including personal injury and/or death and any claims or demands therefor on account of injury, whether caused by negligence of those being released herein or otherwise, which may occur as a result of my being on the property of the Stable, handling or training or riding horses, being in close proximity to horses, and/or engaging in any other activity involving horses, except if such loss, damage or injury is caused by the Stable's gross negligence or wanton willful misconduct.

I also agree to indemnify and hold harmless the Stable and its officers, directors, employees, managers and representatives and others acting on their behalf against all damages sustained or suffered by any person caused by my negligence or willful misconduct while engaging in the above activities. This indemnification shall also include reimbursement of the Stable's attorneys' fees and costs.

I agree to be fully responsible for my own safety at all times. The Stables has advised me to wear properly fitted and secured ASTM-standard/SEI-certified equestrian protective headgear at all times when riding or near horses. I am not relying on the Stables to check any helmet or strap that I may wear, or to monitor my compliance with this advice at any time.

I expressly agree that this Release and Waiver of Liability is governed by the laws of the State of Texas and is intended to be as broad and inclusive as is permitted by Texas law. If any portion of this document is held to be invalid, I expressly agree that the balance shall notwithstanding continue in full legal force

and effect. If I should file a lawsuit in breach of this Release and Waiver of Liability, I agree to pay the attorneys' fees and costs incurred by the Stables in respect of such lawsuit.

The undersigned has read and is voluntarily signing this Release and Waiver of Liability. I certify

that I am at least 18 years of age.	, ,		•
Date:			
Signature:			
Name:			
Address:			
Phone No(s): Cell	Work	Home	