



Trinity Eventing, Inc.
Jennifer Wooten-Macouzet, Trainer
Phone: 805 588 7600
Horsemasters Property
Janet & Jeff Adler
24780 Beaver creek Rd., Beaver creek, Oregon 97004

Release From Liability

1. I, _____ (**Client or parent if child is under 18 years of age**) acknowledge that I have voluntarily applied to participate I'm horseback riding and / or lessons at Trinity Eventing, Inc. owned by Jennifer Wooten-Macouzet, including without limitation riding, jumping, and care & management of horses at Trinity Eventing, Inc. located at 24780 S Beaver creek Rd., Beaver creek, Oregon 97004. I have engaged Jennifer Wooten-Macouzet (Trainer / Instructor) and others of Trinity Eventing, Inc. for the purposes of obtaining instruction in all the aforementioned activities.
2. I am aware that horses are unpredictable and have been known on frequent occasions to BUCK, BOLT, REAR, BITE, STEP ON, AND KICK, and have, on occasions, caused serious injury to their riders and bystanders and have caused substantial property damages. I am also aware, therefore, that all activities associated with horses are considered hazardous activities. I am voluntarily participating in these activities with the full knowledge of the dangers involved, and do hereby agree to accept any and all risk of injury or death and verify this statement by signing the document below. _____ (**initial**)
3. In consideration for being permitted by owner and trainer to participate in such training programs and activities and being permitted by the equestrian center to use such equestrian facilities, I hereby agree that my assignees, heirs, distributes, guardians and legal representatives will not make any claim or demand against, sue or attach the property owner, trainer, or equestrian center or any affiliated person or organization, or the supplier of any facility or equipment that I may use in connection with these activities or on such facilities for injury or damage resulting from the negligence or other acts, as a result of my participation in horseback riding, jumping, or the care and management of said horses or any training in regard thereto or use of such facilities and will hold such persons harmless from and against any and all actions, claims or demands that I _____ (**Client or parent if child is under 18 years of age**), my assignees, heirs, distributes or legal representatives now have or may hereafter have for personal injury or property damages resulting from participation in such activities, further agreeing that I will pay any and all attorney fees and court costs with may be incurred by owner, horse, trainer, and equestrian center or their affiliates by virtue of the foregoing.
4. By participating in riding lessons, camps, shows, clinics, pre-purchase tryouts, breaking, schooling green horses, exercising, training and turnouts of privately owned horses, and daily activities at the Horsemasters Farm, I acknowledge that I am or my child (or children) is partaking in a risk sport and by doing so assume all risks and liability for injury and accident. I hold the property owners (Janet & Jeff Adler, Horsemasters Farm), camp sponsor, instructors, riding attendants, spectators and employees harmless for any injury ro myself or

child (or children), people associated with me and / or the horse I ride or own in this riding activity. _____ **(initial)**

5. By my signature below I hereby consent and agree that Janet & Jeff Adler and Horsemasters Farms, its owners, agents, officers, employees, contractors and any cooperative persons shall not be held responsible for any loss, damage or injury of the rider, owner, horse(s) or equipment, should it occur during any show, lesson or activity of any kind on the total farm property. If any action is taken against the above organizations I shall agree to pay any and all attorney's fees to the above individuals and organization. Signing this entry shall be acceptance of this waiver. In compliance with the Oregon Inherent Risk Law #ORS30.687-30.697.

6. I, _____ **(Client or parent if child is under 18 years of age)** have read and fully understand the foregoing agreement of liability and financial contract. It is with full awareness of the dangers of horseback riding that I agree and sign this document below. Executed this _____ (Day) of _____ (Month), _____ (Year) at Trinity Eventing, Inc.

Rider: Print Name _____ Date: _____
Signature _____

Parent: Print Name _____ Date: _____
Signature _____

Trainer: Print Name _____ Date: _____
Signature _____

Witness: Print Name _____ Date: _____
Signature _____