

**Four Gs Equestrian, Inc. and/or Jacqueline L. George and/or Allison G. Mora, and Third Party Owners
Liability Release, Agreement Not to Sue, and Indemnity Agreement**

I, _____ on behalf of myself and/or my minor child(ren) _____ desiring to take horseback riding lessons and/or use the facilities and horses at Four Gs Equestrian, Inc. and/or Jacqueline L. George and/or Allison G. Mora (hereinafter referred to as "Four Gs Equestrian"), which will include the use of horses that are owned by third parties (hereinafter referred to as "Third Party Owners"), and which will take place on the property address 14830 Smith Sundry Road, Delray Beach, FL 33446, acknowledge that horseback riding and activities that are incidental to horseback riding are inherently dangerous activities. I further acknowledge that serious injury or death of myself and/or my child(ren) can result from engaging in such activities.

In consideration of the use and enjoyment of the aforementioned facilities and horses, including horses owned by Third Party Owners, at Four Gs Equestrian, and/or the furnishing of horseback riding lessons or trail rides to myself and/or my child(ren), I agree on behalf of myself, and/or my child(ren) and his or her heirs, successors and legal representatives, forever to release Four Gs Equestrian and all of its past, present and future employees, officers, directors and agents and their representative heirs and legal representatives (hereinafter collectively referred to as "Four Gs Equestrian"), all Third Party Owners and all of their heirs, successors, agents and legal representatives (hereinafter collectively referred to as "Third Party Owners") from all liability and agree not to sue Four Gs Equestrian and/or Third Party Owners in connection with any and all damages, claims, demands, rights, and causes of action are based upon personal injuries or property damage to myself and/or my child(ren) or the death of myself and/or my child(ren) arising out of horseback riding, lessons, trail rides, the use of the facilities and horses at Four Gs Equestrian, or any activities incidental thereto.

I further agree to indemnify Four Gs Equestrian, and Third Party Owners and to hold each of them harmless from all damage, actions, causes of actions, claims judgments, executions, debts, cost of litigation and attorney's fees, which may in any way arise out of, or result from the furnishing of horseback riding lessons and trail rides to myself and/or my child(ren) and/or the use of the facilities and horses of Four Gs Equestrian, and Third Party Owners, and/or any activities incidental thereto at any time from the date of this Release.

I am fully aware and fully understand that all horses are unpredictable and dangerous. I realize that placing myself and/or my child(ren) in a stable environment is creating a hazardous condition. _____(initials)

I understand that riding horses or ponies is a dangerous sport. I am aware that riders must expect to be injured from time to time. I understand that serious injury or death to myself and/or my child(ren) may result from equestrian accidents. _____(initials)

I realize that professional instruction cannot prevent serious injury or death of myself and/or my child(ren) from working around, handling, or riding horses and ponies. _____(initials)

I am aware that serious injury or death of myself and/or my child's horse or pony is possible when it is handled, trained, in a lesson, or on a trail ride. _____(initials)

I understand that I am fully responsible for any guests that I may have on the property and that I am responsible for fully informing the guest of all risks related to being around, handling or riding horses. _____(initials)

Four Gs Equestrian, its owners, employees and associates have my permission to initiate emergency first aid treatment for myself and/or my child(ren) in case of an accident. They also have my permission to authorize emergency medical treatment by qualified medical personnel for myself and/or my child(ren). _____(initials)

I have read and understand the Release of Liability, Agreement Not to Sue, and Indemnity Agreement, and I acknowledge that by executing this agreement, I am giving up valuable rights. _____(initials)

RELEASE OF IMAGES FOR PROMOTIONAL PURPOSES

I hereby release the use of photo/video images of myself and/or child(ren) for the purpose of evaluation, program, or clinic promotion, and use in marketing materials to the public. _____(initials)

WARNING NO PERSON MAY RIDE UNLESS THEY

1. Have permission of the management, abide by the management's rules, and have signed the Release and Waiver.
2. Are wearing adequate protective headgear (required for all minors) or have signed a headgear waiver and are wearing boots and or shoes with a heel.
3. Maintain control of their horse, ride within their ability, and only in a lesson, scheduled hack, or trail ride, unless on their own horse.
4. Inspect all their tack and equipment to make sure it is in a safe operational condition. _____ (initials)

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 risk of equine activities.

773.05 Limitation on liability of persons making land available to public for recreational purposes.

Nothing in ss.773.01-773.05 shall be construed to limit in any way the limitation of liability granted to private citizens who allow the public to use their land for recreational purposes as provided in s.376.251.

IN WITNESS WHEREOF, I have set my hand this _____ day of _____, 20 _____.

Name(s) of Rider: _____

Name of Parent/Legal Guardian (if under 18 years of age) _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Signature of Rider (if over 18 years of age) _____

Signature of Parent/Legal Guardian (if under 18 years of age) _____

FOR RECOMMENDATION AND WAIVER USE OF ASTM/SEI APPROVED PROTECTIVE HEADGEAR

Four Gs Equestrian, Inc. recommends the use of a properly fitting ASTM/SEI approved equestrian helmet for all individuals participating in horseback riding activities. Protective helmets are REQUIRED for all minors. Four Gs Equestrian, Inc. will provide ASTM/SEI approved helmets. NO minor children may ride without a helmet. I understand the additional safety an ASTM/SEI approved equestrian riding helmet provides. If I choose not to wear a helmet, I take full responsibility for injury or death. I also relieve Four Gs Equestrian from all liability or responsibility which may arise from not wearing a helmet. I have read, understand, and agree to be bound by the stipulations stated in the warning.

Signature of Rider (if over 18 years of age) _____

Signature of Parent/Legal Guardian (if under 18 years of age) _____