

Florida Horse Park Release Form

FLORIDA AGRICULTURE & HORSE PARK AUTHORITY, INC. COMPLETE RELEASE FROM LIABILITY IN CASE OF INJURY OR LOSS, WAIVER INDEMNITY AGREEMENT

I/we understand that horseback riding and related activities, such as eventing and jumping, are very dangerous and involve the risk of serious injury and/or death, and/or property damage, including injury and/or death to horses, spectators, and others. Accordingly, I/we agree that any activity engaged in by me on the premises owned by the state of Florida, or related to horses or horseback riding, if on the premises, is done at my own risk. Accordingly, I/we release and agree to hold harmless the state of Florida, the Florida Agriculture & Horse Park Authority along with its board of directors and employees, and any and all persons or entities who are guarantors or indemnitors of the above, all agents, employees, promoters, sponsors, other horse riders, horse owners, advertisers, sales persons, photographers, volunteers, (hereinafter called Releasees) from all liability for negligence or otherwise. I/we assume full responsibility for the risk of bodily injury, illness, death of myself and/or my horse(s) and any property damage due to the negligence of Releasees or otherwise while the premises owned by the state of Florida, the Florida Agriculture & Horse Park Authority along with its board of directors and employees or heavily engaged in horseback riding-related activities, and/or while training, riding, competing, officiating, observing, volunteering, teaching, boarding, working for, or for any purpose relating to horseback riding, eventing or participating as rider or spectator in such activities. I/we agree not to sue any Releasees, and I/we release and agree to indemnify for the Releasees from and for all liability for the undersigned, his/her person, representatives, assignees, heirs, and demands therefore on account of injury to her person or property, or death of undersigned whether caused by the negligence of the Releasees or otherwise. I/we agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of this state where these activities are conducted, and if any part hereof is held invalid, it is agreed that the balance shall continue of full force and effect. I/we have read and voluntarily signed the release and waiver of liability and indemnity agreement and further agree that no oral representations, statements or inducements apart from the foregoing written agreements have been made nor shall be made except by a written and signed addendum.

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. By filling out the information below, and signing my name, I am agreeing that I have read this entire release and agree to its contents.

Name

I am 21 years of age or older

Signature of Parent or Guardian

Date