



4300 CAMP CHESTNUT RIDGE ROAD
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**RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT for TRAIL RIDING
 READ BEFORE SIGNING**

PARTICIPANT'S NAME _____ AGE _____

Name of Parent or Guardian (if participant is a minor) _____

IN CONSIDERATION of being permitted to participate among and on horses on the premises of or under the auspices of Camp Chestnut Ridge, **on my behalf and on behalf of the participant named above** (we will collectively call ourselves "I" in this release), **I acknowledge, appreciate, and agree that:**

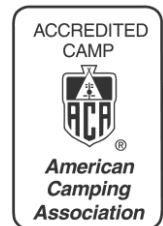
- 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis or death. This risk includes, but is not limited to, my being in the presence of, mounted on, and/or leading horses and includes but is not limited to property damage, injury, or death resulting from the dangers or conditions that are an inherent risk of equine activity. NC Equine law does not hold equine activity sponsors liable for injuries or death to a participant resulting from the inherent risks of equine activities.
- 2) By signing this RELEASE OF LIABILITY, I UNDERSTAND AND KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, EVEN IF ARISING FROM THE NEGLIGENCE OR LIABILITY of those persons released from liability below, and assume full responsibility for my participation. I understand there may be other risks as well, and I agree to assume them; I am not relying on Camp Chestnut Ridge to list all possible risks for me.
- 3) I will comply with all rules and regulations of Camp Chestnut Ridge. If I have a question, or observe any unusual or unnecessary hazard during my participation, I will immediately notify the nearest instructor, director, or manager of Camp Chestnut Ridge.
- 4) I feel that the possible benefits to myself/ my son/ my daughter/ my ward of participation in equine activities or being around horses or on Camp Chestnut Ridge property are greater than the risk assumed. I hereby, intending to be legally bound, for myself on behalf of my heirs and assigns, personal representatives, and next of kin, waive and release forever all claims and damages against Camp Chestnut Ridge and its officers, directors, instructors, volunteers, agents, donors and affiliated persons for any and all injuries and /or losses I/ my son/ my daughter/ my ward may sustain while participating in Camp Chestnut Ridge's horsemanship programs either on or off site, or while being on or near the premises of Camp Chestnut Ridge.

This release shall be valid starting from date executed for as long as participant either (1) participated in any activities associated with or (2) is on or near the premises of Camp Chestnut Ridge. If participant is a minor, Parent or Guardian executes this agreement on behalf of himself/ herself as well as the minor child or legal ward. *(Minors will be required to complete a new form at age 18 or upon change of guardianship.)*

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT OR COERCION BY ANYONE.

X _____ Age _____ Date Signed _____
 Client/Volunteer/Parent or Guardian of Minor (Under age 18)

Received by _____ Date _____



Our mission is to glorify God by making visible the life-changing love of Jesus Christ through the practices of Christian hospitality, responsible care for the earth, and meaningful fellowship that strengthens and grows the Christian community.