PARTICIPANT'S RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH OR PROPERTY DAMAGE. READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

This is an agreement between the Undersign	ed (or minor in my charge) and Stone Bridge Equestrian Center LLC (the Company).
I,(hereinat	ter the "Undersigned") on behalf of myself, my personal representatives, heirs, next-of-kin, spouse and assigns HEREBY
	angerous activity and involves RISKS that may cause SERIOUS INJURY AND IN SOME CASES DEATH, because of ior of horses, regardless of their training and past performance.
activities. I hereby RELEASE, DISCHARO	of your acceptance of this form, I voluntarily assume the risk and danger of injury or death inherent in horseback riding GE AND PROMISE NOT TO SUE the Company, doing business under its own name or any other name and/or any of its and sanctioning organizations (hereinafter the "Releasees"), for any loss, liability, damage, or cost whatsoever arising or including death) to my person or property.
3. Release the Releasees from any claim tha training or selecting horses, maintenance, ca	t such Releasees are or may be negligent in connection with my riding experience or ability including but not limited to re, fit or adjustment of saddles or bridles, instruction or riding skills or supervising riding activities.
	D HARMLESS the Company and its employees and agents from and against any loss, liability, damage or cost they may with any event, my use of a horse and any equipment or gear provided therewith or any acts or omissions of employees or
5. Agree to abide by and follow any instruct participation in any event, use of a horse or a	ions given or rules established by the Company or any of its employees, agents or volunteers with regard to my equipment or gear provided herewith.
Virginia, and is intended to be as broad and i	e foregoing release and waiver of liability, assumption of risk, and indemnity agreement is governed by the State of nclusive as is permitted in Virginia law, and that in the event any portion of this agreement is determined to be invalid, y and enforceability of the balance of the Agreement shall not be affected or impaired in any way and shall continue in ful
	tract and agree that if a lawsuit is filed against the Company or its owners, agents, employees, judges or managers for any he Undersigned will pay all attorney's fees and costs incurred by the Company in defending such an action.
I H	AVE BEEN ADVISED THAT I MUST WEAR A SAFETY HELMET.
I HAVE READ THIS DOCUMENT. CLAIMS.	I UNDERSTAND IT IS A PROMISE NOT TO SUE AND A RELEASE AND INDEMNITY FOR AL
SIGNATURE	DATE
PRINTED NAME:	
ADDRESS:	
CONTACT PHONE NUMBER:	
	PARENT/GUARDIAN WAIVER - FOR MINOR
If the person who is to enter into this or guardian must read and sign the fo	agreement (referred to as the "Undersigned" above) is under eighteen (18) years of age, his/her parent ollowing:
I,	, acting as a parent, natural guardian or legal guardian of
terms on behalf of him/herself and on b	, acting as a parent, natural guardian or legal guardian of (hereinafter the "minor") hereby affirms that he/she has read the Agreement, understands the reement is a release of all claims for injury, death and property damage, and understands and consents to the chalf of the minor, and agrees to indemnify and safe and hold harmless the Releasees from any loss, liability, of any defect in or lack of capacity to act on behalf of minor in executing this agreement.
SIGNATURE OF PARENT/GUARDIA	DATE
PRINTED NAME:	
	EMAIL ADDRESS: