

Field Day at Spring Valley Farm
4160 Hunting Country Road, Landrum, SC 29356
515.231.9875

WAIVER, INDEMNITY AGREEMENT, AND LIABILITY RELEASE
South Carolina and North Carolina

READ CAREFULLY BEFORE SIGNING

I agree to this Waiver, Indemnity Agreement, and Liability Release (“Agreement”) with Camie Stockhausen who is an individual (hereafter referred to as “Instructor”) and Brian and Leisa Todd (hereafter referred to as “Owners”) as a condition for them allowing me and the persons identified below (if any), to do any or all of the following at any time and at any location: be near horses, ponies, mules, or donkeys (hereafter, “equines”), work with, handle, ride, drive, and/or receive instruction or guidance related to riding, driving, handling and/or working with equines. (All of these activities, individually and collectively, will be referred to as “The Activities” throughout this Agreement.)

NAME OF ADULT RIDER OR PARENT OR RIDER (Please print clearly):

NAME OF OTHER CONTRACTING PARTY, if any (Spouse or Other Parent):

Cell Phone Number: _____

To the fullest extent allowed by law, I also make this agreement on behalf of the following who is/are my child/children or legal ward(s):

1. _____ AGE: _____ DOB: _____

2. _____ AGE: _____ DOB: _____

All parts of this Agreement apply to me and each of the children or legal wards listed above. [We will collectively call ourselves "I," "me," or "my" throughout this Agreement.]

IT IS AGREED AS FOLLOWS:

1) Consideration/Binding Effect.

I have voluntarily requested to engage in any or all of The Activities and I am signing this Agreement in consideration for being allowed to engage in any or all of The Activities now and in the future. I understand that although I am signing this Agreement today, I intend for it to be valid and binding when I engage in any or all of The Activities at any time in the future and at any location.

2) Risks of Equine-Related Activities. I understand that anyone riding, driving, handling, working with, or even near an equine at any location can suffer bodily and other injuries. Among other things, equines are unpredictable by nature. For example, when frightened, angry, or under stress, the natural instincts of an equine are to jump forward or sideways, back up quickly, or run away from real or perceived danger by trotting or galloping. Equines also have the ability to kick, buck, rear up, spin around, strike, or bite. I know that equines can do these and other things without warning. I also understand that all equines, even if they have no history of hurting anyone, are powerful and have the potential to be dangerous to people, equines, and other animals. I also understand that riding, driving, handling, working with, or even being near an

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equine can expose me to numerous hazards, which could include, for example, those dangers or conditions which are an integral part of equine activities, including, but not limited to:

- (a) the propensity of an equine to behave in ways that may result in injury, harm, or death to a person on or around the equine;
- (b) the unpredictability of an equine's reaction to sound, sudden movement, an unfamiliar object, a person, or another animal;
- (c) certain hazards such as surface and subsurface conditions;
- (d) collisions with other equines or objects; and
- (e) the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, as failing to maintain control over the animal or not acting within the participant's ability. I understand these risks and dangers that are inherent in equine-related activities, and I agree to assume all of them. I also understand that these are just some of the risks, and I agree to assume others that are not mentioned in this Agreement. I am NOT relying on Instructor or Owners to list all possible equine-related risks in this Agreement or any time, now or in the future.

INITIAL HERE: _____

- 3) **WAIVER AND LIABILITY RELEASE:** As consideration for being allowed to engage in any or all of The Activities, now and in the future and at any location, I (on behalf of myself and my spouse, parents, heirs, representatives, assigns, minor child/ren or legal wards) knowingly, freely, and voluntarily agree to each of the following:

- (a) Instructor and Owners and his/her/its/their respective officers, directors, members, managers, employees, agents, heirs, family members, assigns, representatives, affiliated persons, and others acting on their behalf (hereafter referred to collectively as "The Released Parties") shall not be liable for any losses, injuries, or damages that I may sustain as a result of engaging in any of The Activities at any time or at any location;
- (b) I knowingly and freely assume all risks, known and unknown, even if arising from the negligence of The Released Parties, and I/we assume full responsibility for participation IN ANY OF The Activities; and
- (c) I fully and forever release, waive, and discharge all claims, demands, damages, legal actions, causes of action, or rights of action (present or future) against The Released Parties whether the claims are known, unknown, anticipated or unanticipated, and whether caused by their ordinary negligence, a violation of a state Equine Activity Liability Act, or other legal liability resulting from or arising out of my engaging in The Activities at any time and at any location. The term "damages" means, for example, medical expenses any and all claims or losses because of bodily injuries, mental/emotional injuries, or property damages, death, expenses, and/or personal property damages. This Agreement is intended to apply and be binding regardless of whether I am riding, driving, handling, or near equines.

In accordance with South Carolina law, however, we are not releasing The Released Parties from loss, injury, or damage that is directly caused by gross negligence, willful and wanton misconduct, willful negligence or intentional wrongdoing on part of Instructor or Owners or the Released Parties.

WARNING

Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of

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equine activity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.

Initial here _____

WARNING

Under North Carolina 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 exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina General Statutes.

Initial here _____

Statement of Intention.

I understand that by signing this Agreement, I am giving up certain rights, including the right to bring a claim or suit arising from negligence or liability on part of The Released Parties and of others who are associated with any of them, now and in the future, arising from any aspect of my attendance at and/or participation in The Activities.

Initial here _____

- 4) INDEMNIFICATION. To the fullest extent permitted by law, I also agree to indemnify and hold harmless The Released Parties against any and all claims, demands, actions, liabilities, losses, or suits that are brought against The Released Parties (or either of them) which are in any way connected with my participation in any of the Activities at any time and at any location, including claims that allege acts or omissions of The Released Parties that are negligent or in violation of a state Equine Activity Liability Act. This indemnification shall also include reimbursement of reasonable attorney fees incurred by The Released Parties.
- 5) ASTM/SEI Helmet/Headgear. I understand that I should purchase and wear properly fitted and secured ASTM-standard/SEI-certified protective headgear that is designed for use when riding, driving, handling, or near equines. I am NOT relying on Instructor or Owners to provide a helmet for me, to check any helmet or strap that I may wear, or to monitor my compliance with this suggestion at any time. If I choose to wear a helmet/headgear, if I choose not to wear a helmet/headgear, and the type of helmet/headgear that I may wear are my decisions.

6. Emergencies. Person(s) to Contact in Case of Emergency:

Name: _____

Cell Phone Number: _____

Relationship: _____

- 6) 7. South Carolina law applies to this Agreement, and I agree that this Agreement shall be enforced to the greatest extent permitted by law. If any clause conflicts with applicable law, only that clause will be null and void but the remainder shall stay in full force and effect. This Agreement can only

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be modified in writing and signed by me and Instructor or Owners. I agree to pay any attorney fees and costs for The Released Parties (or either of them) to enforce this Agreement, and I agree to indemnify and hold harmless The Released Parties for such fees and costs.

7) ALSO, I REPRESENT (please check and initial each box below):

- _____ I AM AT OR OVER 18 YEARS OF AGE;
- _____ I AM OF SOUND MIND AND AM NOT SUFFERING FROM SHOCK OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS, OR INTOXICANTS THAT AFFECT MY ABILITY TO READ AND UNDERSTAND THIS AGREEMENT;
- _____ I HAVE READ THIS ENTIRE AGREEMENT (ALL PAGES), AND I FULLY UNDERSTAND ITS TERMS;
- _____ I INTEND FOR THIS AGREEMENT TO BE VALID AND BINDING TODAY AND AT ALL TIMES IN THE FUTURE;
- _____ I AM NOT RELYING ON ANY ORAL OR WRITTEN REPRESENTATION OR STATEMENT MADE BY INSTRUCTOR OR OWNERS REGARDING THIS AGREEMENT, OR ITS TERMS, OTHER THAN WHAT IS SET FORTH IN THIS AGREEMENT;
- _____ I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS IN SIGNING THIS AGREEMENT;
- _____ BY SIGNING THIS AGREEMENT, I ACKNOWLEDGE THAT IF ANYONE IS HURT OR PROPERTY DAMAGED BY PARTICIPATION OF MYSELF AND/OR MY MINOR CHILD/REN IN ANY OF THE ACTIVITIES, I MAY BE FOUND BY A COURT OF LAW TO HAVE WAIVED MY RIGHT TO BRING A LAWSUIT AGAINST ANY OR ALL OF THE RELEASED PARTIES; AND
- _____ ALL OF THE INFORMATION THAT I HAVE PROVIDED IS TRUE AND ACCURATE SIGNATURE:

PRINT NAME ABOVE

SIGNATURE ABOVE

DATE

PRINT NAME OF OTHER CONTRACTING PARTY (Spouse/ Other Parent) ABOVE:

SIGNATURE OF OTHER CONTRACTING PARTY (If any) Signature

DATE