



SAFETY EQUIPMENT ACKNOWLEDGMENT AND RELEASE FORM (For Participants Over the Age of Majority)

Please Print Clearly

Participant's Name: _____ Date of Birth: _____

Address: _____ City _____ Prov. _____ Postal _____

No person riding without a helmet designed for equine activities will be allowed to participate in equine activities prior to reading and signing this form.

TO: SUN MEADOWS EQUESTRIAN CENTRE, their directors, employees, (Name of Person, Organization or Company providing the Equine Activities) officers, volunteers, business operators, and site property owners, (all of them collectively called the HOST):

ACKNOWLEDGMENTS AND STATEMENTS OF PARTICIPANT

Initial each item below After Reading and Understanding the item.

- _____ 1) I Understand the RISKS inherent in equine activities as evidenced by the separately signed Acknowledgment of Risk and Release of Liability Form on file with the "Host".
- _____ 2) I Understand wearing proper safety equipment may reduce injury even though no amount of preplanning can remove all the DANGERS, HAZARDS, and RISKS of equine activities.
- _____ 3) I have Freely Decided to ride without wearing a helmet designed for equine activities which might prevent permanent brain damage in the event of an accident.
- _____ 4) I have Refused Critical Safety Equipment for equine activities against the advice of the "Host".
- _____ 5) I Fully Assume all additional DANGERS, HAZARDS, and RISKS to which my decision to ride without a helmet might expose me.
- _____ 6) I Understand that signing this form Waives certain Legal Rights I might have against the "Host".

Before signing this form I read it (as indicated by my initials above) and I state that I understand it. I further state I am aware that signing this form, waives certain legal rights I and/or the infant Participant and/or our "Legal Representatives" might have against the "HOST".

SIGNED This _____ day of _____, 20____

(Signature of Participant)
Do Not Sign until you Understand All Items Above

(Print HOST Name Witness to Signing & Initialing) (Signature of HOST Witness)

Sun Meadows Equestrian Centre, 7373 Barnhartvale Road, Kamloops, BC V2C 6V8

250 573 5812 or 250 573 2433

sunmeadowsequestrian@gmail.com