Almosta Ranch Dressage Stables And/Or

Gold Star Pacesetters Vaulting Club

HOLD HARMLESS AGREEMENT The undersigned states as follows:

I acknowledge that competitive and pleasure horse riding and vaulting contains inherent risks of injury and damage to me personally, to my horse, and to my equipment. Knowing these facts I, nevertheless, in consideration to your acceptance of this form, for myself, my heirs, executors and administrators hereby indemnify, waive, release, discharge, and hold harmless Almosta Ranch Dressage Stables and/or Gold Star Pacesetters Vaulting Club, their boards of directors, officers, or the employees or agents thereof, and all individual members thereof and all other persons and organizations in any way connected with the events, property, boarding, lessons or any other related activity, and their representatives, heirs, executors, administrators and assigns from any and all right, claim or liability for injury or damages which may occur to me including injuries to animals, or from any and all claims of any kind or nature that I might have as a result of, or arising out of my participation in any activity. Further, I agree that I will defend, indemnify and hold harmless Almosta Ranch Dressage Stables and/or Gold Star Pacesetters Vaulting Club, their officers, directors, members and agents or any of them, indirectly arising from any action or other proceeding brought by or prosecuted for my benefit contrary to this release extended to all claims of every kind and nature whatsoever whether known or unknown and expressly waive any benefits I may have under Texas statutes relating to the release of unknown claims.

Print	
name:	
I do acknowledge that I have read the foregoing paragraph	and know and understand the content thereof.
Participants	
Signature:	Date
_	
Participant's Phonee-mail_	
MINORS MUST HAVE THE FOLLOWING LIABILITY RELEGUARDIAN.	EASE SIGNED BY THEIR PARENT OR LEGAL
We, the undersigned parents of	tables and/or Gold Star Pacesetters Vaulting Club state written above and we expressly agree that the terms shall apply to and be binding upon us and our minor to any injury or damage said minor child, or his or her
Executed this, 20_ (state)	, at (city),
Parent or legal guardian (print name)	
I do acknowledge that I have read the foregoing paragraph agreement is good until revoked in writing.	ns and know and understand the content thereof. This

DATE

SIGNATURE OF PARENT OR GUARDIAN OF PARTICIPATING MINOR

Parent Contact – Home phone	Cell
phone	
E-	
mail	
Address	