



Horseback Riding Assumption of Risk and Waiver of Liability

Waiver, Release of Liability and Assumption of Risks.

I, the undersigned, give permission for my child named below to participate in the horseback riding activity sponsored by Summers-Knoll School and, in consideration for my child's participation, I hereby agree to the following terms of this Waiver, Release of Liability and Assumption of Risks (the "Release"):

I, on behalf of myself and my child, hereby release all Summers-Knoll School Personnel (Personnel is defined as the Summers-Knoll Board of Directors, administration, employees, volunteer staff, instructors, coaches, volunteers and agents or contracted service providers), from any and all liability as to any right of action that may accrue to me, or my child, for any injury or loss that I or my child may suffer while training, preparing, participating in the said horseback riding event. I furthermore release, indemnify and hold harmless the Summers-Knoll School personnel from and against any and all liability, actions, debts, claims and demands of every kind whatsoever, specifically including, but not limited to, any claim of negligence or negligent acts or omissions and any present or future claim, loss or liability for injury to person or property that I or my child may suffer, for which I or my child may be liable to any other person, that may or does arise out of my child's participation in the event.

In the event of an accident or serious illness, I hereby authorize Summers-Knoll School personnel to obtain medical treatment for my child. I hereby hold harmless and agree to indemnify Summers-Knoll School personnel from any claims, causes of action, damages and or liabilities, arising out of or resulting from said medical treatment. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries that may occur to my child during his or her participation in the event.

I understand that when I refer to myself or my child in this release, I am referring not only to myself and my child but to our respective agents, representatives, executors, trustees, conservators, guardians, heirs, administrators, subrogees, insurers, indemnitors and assigns.

This Release contains the entire agreement between the parties to this agreement and the terms of this release are contractual and not a mere recital.

This release shall not in any way be construed as an admission by Summers-Knoll School personnel that they have acted improperly or unlawfully in any way, and this release does not constitute an admission of any kind of liability whatsoever, or that any party has any rights whatsoever against the other.

Parental/Guardian Waiver for Minor Children

I hereby certify that I am the parent or guardian of the minor child(ren) listed below, that the child(ren) are fully capable of participating in the "Activities", and that the child(ren) have no physical or mental disabilities or infirmities that would restrict full participation in the "Activities", except as made known to Summers-Knoll School.

On behalf of the minor child(ren) listed below, I hereby affirm the above assumption of risk and waiver of liability for such children only with regard to those risks inherent to the "Activities".

Name of Child: _____

Name of Child: _____

Name of Child: _____

Signature of Parent or Guardian: _____ Date: _____