



PARADISE FARM RELEASE AND WAIVER OF LIABILITY

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 EQUINE ACTIVITY, PURSUANT TO ARTICLE 7, CHAPTER 9 OF TITLE 47, CODE OF LAWS OF SOUTH CAROLINA, 1976

I request permission to participate in any form of equestrian endeavor including cross country riding at Paradise Farm.

I fully understand that any equestrian endeavor, including cross country riding (which includes riding over fences, other obstacles, and steep and rough terrain) is a very dangerous activity. I wish to participate in these activities knowing they are dangerous. I accept and assume all the risk of injury (including death) to me or my property in exchange for being permitted to participate in these activities, for myself, my heirs, guardians, and legal representatives. I release and agree not to make or bring any claim of any kind against Lellie Ward, Paradise Farm, or any of its employees for any injury (including death), to me or for any damage to my property whether from anyone's negligence or any other cause, arising out of my participation in any form of riding including cross country riding.

I also agree that if anyone makes any claims because of any injury to me (including death), or for any damage to my property, I will keep all those released by this agreement free from any liability of any kind associated with my participation in cross country riding and all of its associated activities. I further agree to keep all those related to this agreement free from any damage, liability, or costs, including attorney fees, arising out of any claims made on my behalf.

PLEASE MAKE SURE YOUR SIGNATURE IS LEGIBLE

DATE: _____

SIGNATURE: _____

RELATIONSHIP TO RIDER: _____

RIDER NAME: _____

ADDRESS: _____

MANDATORY EMAIL ADDRESS: _____

EMERGENCY PHONE NUMBER: _____

- CHECK THIS BOX IF YOU ARE A PROFESSIONAL IN CHARGE OF THE ABOVE RIDER AND HAVE PROVIDED PARADISE FARM WITH A CURRENT INSURANCE FORM, OR ARE ATTACHING A COPY TO THIS FORM.