



Therapeutic Riding Center

PO Box 10724
Lancaster, PA 17605-0724

www.greystonemanortrc.org

(717) 615-9222 main (717) 203-7388 volunteer coordinator

Name _____

Date _____

Day Guest/Event _____

PLEASE FILL OUT BOTH SIDES

**GENERAL ACTIVITY RELEASE, ASSUMPTION OF RISK and
WAIVER OF LIABILITY AGREEMENT**

WARNING

You are advised that there are inherent risks in engaging in equine activities, including the risk of serious injury or death. By engaging in equine activities and in accordance with this agreement you hereby assume all risks of injury or death.

BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH OR PROPERTY DAMAGE. READ IT CAREFULLY BEFORE SIGNING. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

THIS AGREEMENT is made by and between LANCASTER COUNTY THERAPEUTIC RIDING, INC., a.k.a. GREYSTONE MANOR THERAPEUTIC RIDING CENTER, its administrators, directors, officers, volunteers, employees, sponsors, advertisers, and agents, hereinafter referred to as "Greystone Manor TRC" and _____, hereinafter referred to as "Participant."

For consideration received, and in return for the use, today and on all future dates by me and/or my child of the facilities and property of Greystone Manor TRC, I AGREE for myself, and/or my child, my/our administrators and assigns, heirs, and representatives, as follows:

I ACKNOWLEDGE that there are inherent risks associated with equine activities such as described below, and I HEREBY EXPRESSLY ASSUME ALL RISKS associated with participating in such activities. Inherent risks are further described in the Pennsylvania Equine Activity Statute, 4 P.S. § 601 et seq., and include but are not limited to: the propensity of equines to behave in ways such as, running, bucking, biting, kicking, shying, stumbling, rearing, falling or stepping on, that may result in an injury, harm or death to persons on or around them; the unpredictability of equine's reaction to such things as sounds, sudden movement and unfamiliar objects, persons or other animals; certain hazards such as surface and subsurface conditions; collisions with other animals; the limited availability of emergency medical care; and the potential of others to act in a negligent manner that may contribute to injury, such as failing to maintain control over the animal or not acting within an individual's ability.

I AGREE to abide by and follow Greystone Manor TRC's rules and regulations, which shall be posted and/or available from time to time. I FURTHER ACKNOWLEDGE that the behavior of any animal is contingent to some extent upon my ability or that of my child. I assume all risks therefor.

I hereby, intending to be legally bound for myself, my heirs and assigns, executors or administrators expressly WAIVE AND RELEASE forever any and all claims for personal injury or property damage against Greystone Manor TRC for any and all injuries and/or losses I and/or my child may sustain.

I AGREE to hold harmless, indemnify and defend Greystone Manor TRC against, and hold harmless from, any and all claims, demands, causes of action, damages, judgments, orders, costs or expenses, including attorney's fees, whether actually incurred or not, which may in any way arise from or be in any way connected with Participant's use of or presence upon the property of Greystone Manor TRC and the facilities located thereon.

In the event that Participant is a minor, I, the parent or guardian shall FURTHER INDEMNIFY, DEFEND and HOLD Greystone Manor TRC HARMLESS from any such claims by said minor child, regardless of any statute of limitations or contractual limitation of actions.

In the event I am using my own horse, or a horse(s) not owned by Greystone Manor TRC, I WARRANT that said horse(s) shall be free from infection, contagious or transmittable diseases. Greystone Manor TRC reserves the right to refuse access or use of any horse upon the premises that does not appear to Greystone Manor TRC to be in good health, or is deemed dangerous or undesirable.

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Cont'd

If, during my participation in Greystone Manor TRC activities, I should need emergency medical treatment and I (and/or my minor child) am (are/is) not able to give my consent for or make arrangements for that treatment because of my injuries, I AUTHORIZE Greystone Manor TRC to take whatever measures are necessary to protect my health and well-being, including, if necessary, hospitalization.

I UNDERSTAND that I am expected and encouraged to obtain my own medical or health insurance coverage. I UNDERSTAND that Greystone Manor TRC assumes no responsibility for nor obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of the Greystone Manor TRC.

I agree to waive the protection of any applicable statutes in this jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing said release.

By signing below, I acknowledge that I enter into this release after having read it and that I place my signature on this release of my own free voluntary act and deed. By signing below, I represent to Greystone Manor TRC that I fully understand its contents, that I do not need any further explanation, and that I waive any further explanation.

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| PARTICIPANT Signature / Legal Guardian Signature(s): | VOLUNTEER Signature / Legal Guardian Signature(s): |
| Print Participant Name / Legal Guardian Name(s): | Print Volunteer Name / Legal Guardian Signature(s): |
| DATE: | DATE: |
| Emergency Contact: _____ Relationship: _____ Phone: _____ | |

PARENT / GUARDIAN WAIVER— FOR MINOR

If Participant is under eighteen (18) years of age, his or her parent or guardian must read and sign the following: I, _____, acting as parent, natural guardian or legal guardian of _____ (hereinafter "the minor") hereby affirms that I have read the Agreement, understand that the Agreement is a release of all claims for injury, death and property damage. I consent to the terms on behalf of myself and on behalf of the minor, and agree to indemnify and save and hold harmless Greystone Manor TRC from any loss, liability, damage, or cost that it may incur because of any defect in or lack of capacity to act on behalf of minor in executing this Agreement.

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| PARTICIPANT Signature / Legal Guardian Signature(s): | VOLUNTEER Signature / Legal Guardian Signature(s): |
| Print Participant Name / Legal Guardian Name(s): | Print Volunteer Name / Legal Guardian Signature(s): |
| DATE: | DATE: |
| Emergency Contact: _____ Relationship: _____ Phone: _____ | |