



RELEASE/WAIVER, ASSUMPTION OF RISK AND IDEMNIFICATION AGREEMENT

In consideration of my daughter's/son's and/or my participation in any equine and/or other sports related and non-sports related activities at Hill Top Stables at Hunter's Meadow Farm (10018 Leavells Road, Fredericksburg, Virginia 22407 "the property"), I hereby release and waive any rights to sue the, it's employees agents and representatives for any loss, damage, injury or death to person or property sustained by me/my daughter/son in equine activities by any cause whatsoever, including but not limited to any risk inherent in any equine/sport activity such as (i) the propensity of an equine to behave in dangerous ways which may result in injury or death to a participant or bystander, to damage property; or (ii) the inability to predict an equine's reaction to sound, movements, objects, persons, or animals; (iii) hazards of surface or subsurface conditions, whether known or unknown; (iv) the experience level of any participant; and (v) the condition and age of the equipment or tack. I assume all of the foregoing risks and any other risks inherent in equine/sport activities and accept complete responsibility for making any and all examinations to inspections relating to those risks and any other potential risks of recreational activities, and I agree and understand that the potential risks of recreational activities, and I agree and understand that Hill Top Stables At Hunter's Meadow Farm (Hill Top Stables, LLC) ,Bonnie H. Wyne and Barbara H. Cecil shall have no responsibility whatsoever to make any examination or inspection. I further assume all risk of, and agree to hold harmless the "the Property", TAK.LLC., Bonnie H. Wyne, Barbara H. Cecil, Gildea, LLC it's employees, representatives, and agents from and against any and all loss, damage, injury or death to person or property, by whatever cause, including any act or omission,, negligent or otherwise, on the part of "the Property", KAT,LLC, Bonnie H. Wyne , Barbara H. Cecil, Gildea, LLC and its employees, representatives or agents, or on the part of any other person, businesses or other corporations.

If (I am) (my daughter/son) is a participant in classes and/or programs, then I agree and understand that this Agreement shall apply to all equine activities in which (I am) (my daughter/son) is involved during the next twelve months from the date below.

I hereby certify that the foregoing statements and representations are being made by me knowingly, freely and voluntarily, and I understand that Hill Top Stables At Hunter's Meadow Farm, Hill Top Stables, LLC, Bonnie H. Wyne and Barbara H. Cecil are expressly relying upon the foregoing statements and representations in permitting my/my daughter's/son's participation in any equine activities.

I further agree to abide by all of Hill Top Stables at Hunter's Meadow Farm's (Hill Top Stables, LLC) rules and regulations.

CAUTION READ BEFORE SIGNING **Date:** _____

Name: _____ **Address:** _____

Phone Number: _____

Hill Top Stables (Hill Top Stables,.LLC)

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