

**WAIVER OF LIABILITY & LEGAL RELEASE  
FOR  
2nd ANNUAL POKER RIDE AND CHARITY FUNDRAISER  
ANARCHIST MOUNTAIN, OSOYOOS, BC**

**PROVINCE OF BRITISH COLUMBIA    SOUTH OKANAGAN**

Date: June / 25 / 2011

(Please Print Clearly)

I, \_\_\_\_\_, acknowledge and accept that horseback riding and activities related thereto, involve the risk of personal injury. By my signature, (and, in case of a minor\*, the parent's or guardian's signature), they and I, hereby waive all rights, if any, claims, causes of action and lawsuits against Regal Ridge, their family, heirs, executors, legal representatives, administrators, successors, assigns, guests, employees, or agents affiliated with any of them in any manner (collectively, herein "Regal Ridge") OR the Anarchist Mountain Community Society, their family, heirs, executors, legal representatives, administrators, successors, assigns, guests, employees, or agents affiliated with any of them in any manner (collectively, herein "AMCS"), for any injury, liability or damages which may occur while riding any horse, whether leased or owned by me or by any other person, or for any injury or damages which may occur while participating in any activity related to horseback riding. I agree to indemnify, defend and hold harmless Regal Ridge, and the AMCS or any person or entity whose land a horseback ride crosses, for any accident, injury, or loss that might occur, and free such persons from all liability for such injury or loss. I understand that horseback riding always involves danger and I ride at my own risk.

**I understand** that horseback riding involves being in remote areas for extended periods of time, far from communications, transportation, and medical facilities; that these areas have many natural and man-made hazards which horseback riders cannot anticipate, identify, modify, or eliminate; that horses can be excitable, difficult to control, and unpredictable; and that accidents can happen to anyone at any time. I further understand that horseback riding involves such things as crossing creeks, galloping over uneven terrain, and being in strange places under adverse weather conditions which could result in injury to myself and the horse I am riding. I acknowledge that accidental injuries have occurred in the past.

**I agree** to take full responsibility for myself and the animal I am riding. I am aware that wearing a certified safety helmet is a good preventive measure against head injury, and further understand that helmets are required for all minor\* riders and that it is strongly recommended that all other riders wear a helmet. Any rider, who does not wear a helmet, understands that they do so at their own risk. My signature below constitutes acceptance of the above terms and conditions. I have read and fully understand this liability release. **All Minors\* are required to wear a helmet and to be accompanied by a parent or guardian.**

**Medical Release Horse/Rider**

**I further agree** to allow and be financially responsible for any necessary emergency medical treatment by any available physician at any available medical institution in the event of my injury or illness. I likewise agree to allow and be financially responsible for any necessary veterinary treatment for the horse that I ride. I have read and understand this liability release.

Date \_\_\_\_ / \_\_\_\_ / **2011**

**Print Name**

**Rider Signature**

\_\_\_\_\_

\_\_\_\_\_

(Name of Parent or Guardian if Rider is a Minor\*)

(Signature of Parent or Guardian if Rider is a Minor\*)

Street Address (Please print legibly)

City Province Postal Code Home Phone Office Phone or Cell

E Mail: \_\_\_\_\_ @ \_\_\_\_\_

In Case of Accident Notify: \_\_\_\_\_ Phone: \_\_\_\_\_

\*Minor is defined, for the purposes of this waiver, as any person **16 years** of age or younger.



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Osoyoos, BC V0H 1V6



PO Box 1005  
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**19/04/11**