



Equestrian Center of Walnut Creek Release of Liability

PARTICIPANT _____
TELEPHONE _____ EMAIL _____
ADDRESS _____
CITY _____ ZIP _____

I acknowledge that horseback riding is a sport that carries inherent risks of injury and damage to me, my horse, and property. I knowingly assume all risks, whether known or unknown, of horseback riding. I hereby release the **EQUESTRIAN CENTER OF WALNUT CREEK** (hereinafter referred to as the CORPORATION) and the **CITY OF WALNUT CREEK** (hereinafter referred to as the CITY) from all liability for any act of negligence or want of ordinary care on the part of the Corporation, and/or City or any of its agents. In consideration of my participation in events organized or sponsored by the Corporation, I hereby waive, release, and discharge the Corporation and the City; their directors, officers, agents employees, and volunteers; their representatives, heirs, and executors; and assigns from any and all claims of liability for injury or damage to myself, my animals, or my property arising out of my participation. This agreement is binding upon my executors, heirs, and assigns. I expressly waive any rights I may have under California Civil Code 1542, which states: "A general release does not extend to claims which the creditors do not know or suspect to exist in his favor at the time of executing the release, which if known by him, might materially affect his settlement with the debtor." I agree that I will indemnify and hold harmless the Corporation and City; their officers, officials, directors, employees, agents and volunteers; against all claims, demands, and causes of actions, including court costs and actual attorney fees arising from any proceeding or lawsuits, brought by or prosecuted for my benefit, in which this release is upheld. I acknowledge that I have read this "Release of Liability" and understand its contents.

SIGNATURE _____ DATE _____

PARENT OR LEGAL GUARDIAN MUST COMPLETE & SIGN BELOW IF PARTICIPANT IS MINOR:

I, the undersigned parent or legal guardian of the above minor-aged participant, in consideration of his/her participation in the event, agree that the terms and conditions of this *Release of Liability* shall be binding as to damage or injury to my minor, his/her animals, and property arising out of his/her participation in events. I acknowledge that I have read this release of liability and understand its contents.

NAME _____ RELATIONSHIP _____
ADDRESS _____
CITY _____ ZIP _____
SIGNATURE _____ DATE _____

PO Box 3532, Walnut Creek, CA 94598

www.ecwc.org

925-939-2929