



REGISTRATION FORM

Little Fork Volunteer Fire Department
Trail Ride & Scavenger Hunt
Saturday, April 13, 2019
Pre-registration Deadline: April 9, 2019

Name: _____ Email: _____
Address: _____
Town/City: _____ Zip: _____ Phone: _____
Emergency Contact: _____ Emergency Phone: _____

If you are riding in a group, please list other riders below:

**REQUIRED: Copy of Negative Coggins must be mailed with registration
or presented at check-in**

Please make check payable to: Little Fork Volunteer Fire & Rescue Company

**Print and Mail this registration form
together with your nonrefundable tax-deductible payment
of \$40.00 per rider to:
Susan Smith
7073 Cedar Crossing Way
Rixeyville VA 22737**

A Separate Entry Form is Required for Each Rider



WAIVER

I hereby enter the Little Fork Volunteer Fire & Rescue Company Trail Ride and Scavenger Hunt **at my own risk**. I understand 1) that trail riding can involve being in remote areas for extended periods of time, far from communications, transportation and medical care, 2) that these areas may have many natural hazards which ride management cannot anticipate, eliminate or control, 3) that horses can be excitable, unpredictable and difficult to control, and 4) that accidents can happen to anyone at any time and may results in severe injury or death.

By affixing my signature below, I do hereby hold harmless today and forever release Little Fork Volunteer Fire & Rescue Company, ride personnel, and private land owners over whose property this trail ride will be conducted from any damages, liability, lawsuit or monetary charges resulting from any possible accident, injury or loss, either caused by me or my horse, or to me or my horse and/or equipment. Also, it is understood that by affixing my signature below that **I HAVE READ AND UNDERSTAND THE TERMS OF THIS LIABILITY RELEASE.**

Signature: _____ **Date:** _____

Printed Name: _____

HORSEBACK RIDING RELEASE AND WAIVER OF LIABILITY

I am aware that horseback riding, trail rides and any equine activity are athletic events which pose potentially serious risks of injuries or death to their participants. I understand that my horse, other persons or I may be injured or die as a result of my negligence, the negligence of others, or through no fault of myself or anyone else, because of the nature of the activity in which I am going to be engaged. I also understand that horses, even the most well trained horses, are often unpredictable and often difficult to control.

With this waiver, I accept notice of the provisions of Section 3.2-6200 through 3.2-6302 of the Code of Virginia, which state in part: That there are intrinsic dangers involved in equine (horse) activities, including (i) the propensity of equines to behave in ways that may result in injury, harm, or death to persons on or around them; (ii) the unpredictability of an equine's reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals; (iii) certain hazards such as surface and subsurface conditions; (iv) collisions with other animals or objects; and (v) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant's ability. This Waiver and Release shall remain valid unless expressly revoked by the participant or parent or guardian of a minor, in writing, with receipt acknowledged by Mr. or Mrs. Patrick Smith ("Mr. Smith").

Furthermore, I expressly assume the risk of injury or death due to negligence by Mr. Smith or anyone under Mr. Smith's control or supervision (including without limitation his family, employees or tenants), and I acknowledge and agree that the foregoing persons are not responsible for my safety or for the safety of any minor child for whom I am responsible.

With the knowledge of the foregoing, and as an inducement for Mr. Smith to allow me (and any minor children for whom I am parent, legal guardian, or otherwise responsible) to ride at his farm, known as **Three Oaks Farm**, which is located in Rixeyville, Virginia (the "Farm"), I hereby agree to waive or release (give up) any and all rights that I or my heirs, personal representative(s) or assigns, may have to make a claim against Mr. Smith arising from any damages, injury, or death which I or any other person might sustain or which might occur to any horse I am riding as a result of my horseback riding or from engaging in any activity whatsoever related in any way to horseback riding.

I further agree to indemnify (hold harmless) all of the foregoing from any claims which I might make or which might be made on my behalf by others or which might be made against me by others, arising from riding at the Farm, or from engaging in any activity whatsoever related in any way to horseback riding at the Farm. Furthermore, I agree to indemnify Mr. Smith for any injury, death, loss of or damage to any personal property which might occur during horseback riding or while engaging in any activity whatsoever related in any way to horseback riding.

BY SIGNING THIS RELEASE AND WAIVER, I UNDERSTAND THAT I AM GIVING UP (WAIVING OR RELEASING) ANY RIGHT I HAVE TO SUE OR MAKE A CLAIM WHICH I MIGHT HAVE OR WHICH MIGHT SUBSEQUENTLY ARISE OR OCCUR AGAINST MR. SMITH FOR ANY INJURIES I MIGHT SUSTAIN WHILE HORSEBACK RIDING, AND THAT I AM INDEMNIFYING (HOLDING HARMLESS) MR. SMITH FOR INJURING ANYONE ELSE OR ANY HORSE RIDDEN BY ANOTHER WHILE SO ENGAGED. IT IS MY INTENT TO GIVE UP THOSE RIGHTS AND PROVIDE THE HOLD HARMLESS AGREEMENT, AND I DO SO KNOWINGLY AND VOLUNTARILY.

Signed: _____ Date: _____, 20 ____
(You must be 18 years of age or older to sign this form)
You MUST – Print Your Name: _____

CHECK IF APPLICABLE : I am signing this Release and Waiver not only for myself, but also on behalf of the following minor children for whom I am parent, legal guardian, or otherwise responsible

Print Name of Minor

Signature of Minor

Print Name of Minor

Signature of Minor

This release is for the Commonwealth of Virginia