



AGREEMENT FOR RELEASE AND WAIVER OF LIABILITY

I request permission to utilize the equine facilities of Matador Farm and Rattlewood Farms, located at 1560 N. Oxford Rd. and 1935 Rattle Dance Dr. Oxford, MI 48371.

I fully understand that horse back riding and related activities (which includes riding over fences, other obstacles and dangerous and rough terrain) are very dangerous activities. I wish to participate in these activities knowing they are dangerous. I accept and assume all risks of injury (including death) to me or my property.

In exchange for being permitted to utilize Matador Farm facilities , for myself, my heirs, guardians and legal representatives, I release and agree not to make or bring any claim of any kind against JESSICA M. FILIATRAULT, GARY R. WOOD, MATADOR FARM LLC, RATTLEWOOD FARMS, or their managers, officers, directors, members, employees, or guests for any injury (including death), to me or any damage to my property whether from anyone's negligence or not, or any other cause, arising out of my participation in these dangerous horseback riding, and related activities; and I also agree if anyone makes any claims because of any injury to me (including death), or any damage to my property, I will keep all those released by this agreement free of any damages or costs because of those claims.

EQUINE ACTIVITY LIABILITY LAW. I understand under the MICHIGAN EQUINE ACTIVITY ACT (1994 P.A. 351) that:

“AN EQUINE PROFESSIONAL (AS DEFINED IN THE ACT) IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN AN EQUINE ACTIVITY RESULTING FROM AN INHERENT RISK OF THE EQUINE ACTIVITY.”

I FURTHER UNDERSTAND and agree that this **RELEASE** and the release of liability provisions contained herein shall constitute a **WAIVER OF LIABILITY FOR INJURY TO OR DEATH OF A PARTICIPANT** (as defined in the Act) in addition to and not in exclusion of the provisions of the Michigan Equine Activity Liability Act, 1994 P.A. 351.

DATED: _____, 20_____

Signature (Parent signature, if minor)

Phone Number

Print Name

E-mail Address

Address

Emergency Contact