

Liability Waiver

Under Colorado Law, an Equine Professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities pursuant to section 13-21-119, Colorado revised statutes.

Waiver, indemnity and release in consideration of Kari Rippey with KR Training - Equine Matchmaker, located at 2494 Vista Dr, Larkspur, CO 80116 (the "Premises"), granting the undersigned the right to participate in horse riding and handling activities ("equine activities") on the Premises, I, for myself, my heirs, successors and assigns, and if I am a guardian of a minor, for such minor, his heirs, successors and assigns, hereby waive, release and discharge all residents of the premises, its owner Kari Rippey, managers, agents, officers and employees (hereafter, collectively, "KR Training" of and from all claims, demands, damages, actions and causes of action of any sort, for injuries sustained to my person, my horse and/or my property, for whatever reason, including, without limitation, negligence by KR Training.

I assume all risks of injury to my person and property that may be sustained in connection with any equine activity conducted in and about the premises or at any other locations as may be utilized by KR Training.

I hereby further agree to indemnity and hold harmless KR Training against liability, damages, loss of expense arising from any bodily injury, including death, at any time sustained by me or my relatives, heirs, subcontractors, guests, permittees, agents, servants of employees or on account of damage to property arising out of, or in consequence of, the premises and equine activities.

I am 18 years of age or older, I certify that my attendance and participation in the stated equine activities is voluntary, and I have read and understand the foregoing Waiver, Indemnity and Release. I understand that equine activities are inherently dangerous, and I assume the risk of all dangerous condition concerning the premises and the equine activities, and I waive all specific notice of the existence of such conditions.

RIDER NAME: _____

RIDER SIGNATURE: _____
(Parent or Guardian if Rider is under 18)

DATE: _____

EMERGENCY CONTACT (Full Name and Phone Number):
