

RELEASE AND WAIVER OF LIABILITY PARTICIPANT

Please complete this form and email or deliver to the Office at Scenic NSW Equine Centre (must be completed for each participant).

Dangerous Recreational Activity Warning

Horse riding is a dangerous recreational activity; people undertaking horse related activities, including but not limited to the mounting, riding, walking, dismounting, grooming, training, feeding and otherwise being in the physical proximity of horses have a higher risk of serious INJURY or DEATH.

Horses are animals and all animals can act in a sudden and unpredictable way, especially when frightened or hurt. The participant acknowledges that participation in horse related activities is at the participant's own risk.

The participant agrees:

- not to drink alcohol or take drugs prohibited by law before or during horse related activities;
- to ride the horse in a safe and controlled manner;
- to wear an approved helmet and footwear at all times;
- read and follow all signs and follow instructions from Staff at Scenic NSW Equine Centre;
- authorise the Staff at Scenic NSW Equine Centre to administer first aid and call an ambulance if necessary for the medical attention of myself/my child; and
- agree to bear any cost thereby incurred.

| PARTICIPANT | | | |
|---------------------------|------------------------------|---|--------------------------|
| First Name | Surname | | |
| Residential Address | | | |
| | State | Postcode | |
| Telephone | Mobile | | |
| Email | | | |
| EMERGENCY CONTACT DETAILS | | RIDING EXPERIENCE | |
| Full Name | Very Experienced | <input type="checkbox"/> Less than 20 hours | <input type="checkbox"/> |
| Relationship | Less than 50 hours | <input type="checkbox"/> Never ridden | <input type="checkbox"/> |
| Contact Number | Details | | |
| | | | |
| Is applicant under 18? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| PARENT/GUARDIAN | | | |
| First Name | Surname | | |
| Telephone | Mobile | | |
| Email | | | |

Effect of this Document (to be signed by a parent/guardian guest if under 18)

I have had sufficient opportunity to read this release and waiver of liability, fully understand its terms, understand that i have given up substantial rights by signing it, and sign it freely and voluntarily without inducement of any kind.

I understand that my signature to this document constitutes a complete and unconditional release of all liability of Scenic NSW Equine Centre Pty Ltd, including all of its public officers, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

| | |
|--------|-----------|
| Signed | Full Name |
| | Date |