



HORSES for
HANDICAPPED
 hfhinfo@horsesforhandicappedms.com

To: All HFH Volunteers
 Re: Horses for Handicapped Event

Volunteer Release of Liability

I, _____, in consideration of my participation in any and all events associated with Horses for Handicapped Inc., (HFH) waive and release HFH and their representatives, officers, directors, volunteers and agents, heirs, executors and assigns (collectively the "Released and Indemnified Parties") from any present and future claims of liability for injury, illness or damage to myself, my animals, or my property arising out of my participation. This is binding upon my executors, heirs and assigns. I understand that HFH assumes no liability for such accidents or acts of negligence or gross negligence by anyone, including the Released and Indemnified Parties.

I agree and understand that any equine/farm activity involves specific risks of of personal injury or property damage arising from approaching, handling, mounting, riding and dismounting a horses and from observing or participating in equine/farm activities.

WARNING

UNDER MISSISSIPPI LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISK OF EQUINE ACTIVITIES, PURSUANT TO THE OFFICIAL CODE OF MISSISSIPPI ANNOTATED.

PHOTOGRAPHIC RELEASE. I grant and convey unto Horses for Handicapped all right, title and interest in any and all photographic images and video or audio recordings made during my participation at HFH.

I acknowledge that I have carefully read this agreement and Release of Liability and know and understand its contents and voluntarily sign my name evidencing my acceptance of the above provisions. (VOLUNTEERS 18 AND OVER SIGN BELOW)

Signed: _____ Date: _____

IF UNDER 18 A LEGAL GUARDIAN/PARENT MUST SIGN BELOW ON YOUR BEHALF

I represent to HFH that I am the parent or guardian of the Volunteer. On behalf of that Volunteer, I agree and accept all provisions of the foregoing Volunteer Release of Liability. I am authorized to sign this release on behalf of the Volunteer and my doing so legally binds the Volunteer as if he/she were not a minor.

Signed (Parent/Guardian): _____ Date: _____