

Faith Farm  
5016 256<sup>th</sup> Ave NE  
Redmond, WA 98053  
(425)898-9778

**RELEASE/HOLD HARMLESS AGREEMENT**

**THIS RELEASE CONTAINS IMPORTANT LIMITATIONS OF LEGAL LIABILITY**

**READ IT**

**EACH UNDERSIGNED PERSON states:**

I am aware that all forms of horse riding and vaulting, whether competitive or for pleasure, and horse handling, involve inherent risks of injury and damage to me personally, to my horse, to my equipment, and to others. Knowing these facts, I nevertheless, wish to participate in certain activities with Katy Venters involving horse riding and vaulting.

In consideration of your acceptance of this form, and as part payment for the right to participate in horse riding and vaulting activities, for myself, my heirs, assigns and personal representatives, individually, jointly and severally, fully and forever, I hereby assume all risks above named and hold harmless, indemnify, release, defend and discharge Katy Venters, Gerald, and Cynthia Duppong, respectively, their agents, servants, employees, partners, attorneys, successors, administrators, executors, assigns, heirs, personal representatives, and all other persons associated with her or in any way connected to the events and activities, including lessons, riding, vaulting, and competition or pleasure horse riding involved herein, from any and all actions, debts, claims or demands of whatsoever kind or nature which may arise out of or in connection with my participation in any activities involving or related to horse riding and vaulting arranged for me by Katy Venters.

I recognize that the future cannot be predicted with certainty. I assume the risk that I may be injured but I am satisfied that my signature below is proper, and I waive any assertion that this RELEASE/HOLD HARMLESS AGREEMENT is not fairly and knowingly entered into.

I hereby further declare that the terms of this release have been fully read and understood. I have had every opportunity to consult independent counsel.

This RELEASE/HOLD HARMLESS AGREEMENT shall be construed, enforced and interpreted according to the laws of the State of Washington.

I declare under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
PARTICIPANT'S SIGNATURE  
SIGNED AT (CITY,WA)

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
SIGNATURE OF PARENT  
SIGNED AT (CITY,WA)

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
(PLEASE PRINT NAME OF STUDENT)