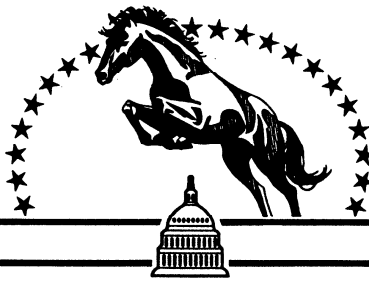


**POTOMAC
HORSE CENTER**



14211 Quince Orchard Road
North Potomac, MD 20878
Phone 301-208-0200
Fax 301-208-0201

Name of Rider: _____

Address of Rider: _____
STREET ADDRESS CITY STATE ZIP PHONE

Name of NCAEL/NCSSL Team _____

Liability Release: IN CONSIDERATION of the Potomac Horse Center, Inc. (“PHC”), allowing my participation in this activity or any other activity, under the terms set forth herein, I the rider or visitor, for myself and on behalf of my child and/or legal ward, heirs, administrators, personal representatives, or assigns, do agree to fully indemnify and hold harmless from any and all costs and expenses, including but not limited to ambulance service fees, release and discharge PHC, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, if applicable, (including but not limited to the Maryland-National Capital Park and Planning Commission and its employees, and Montgomery County, MD), affiliated organizations, insurers, and others acting on behalf of PHC or the individuals and entities set forth herein (hereinafter collectively known as the “Parties”), of and from all claims, demands, causes of action and legal liability, whether known or unknown, anticipated or unanticipated, due to PHC and the Parties ordinary negligence; and I do further agree that except in the event of gross negligence and willful and wanton misconduct, I shall not bring any claim, demand, legal action and/or cause of action, against PHC and/or the Parties for any loss (including but not limited to economic and non-economic loss, loss due to bodily injury, death and/or property damage as well as damage to my horse or any horse borrowed or leased by me) sustained by me and/or my minor child and/or legal ward in relation to this activity, the premises and operations of PHC, to include while riding, handling or otherwise being near any horse at this activity or any other activity, whether the horse is owned by or in the care, custody, and control of PHC, or a third party, on or off of the premises of PHC.

I understand and acknowledge that horseback riding is a dangerous sport activity and that there are numerous obvious and non-obvious inherent risks involved in riding and working around horses, such risks can include bodily injury and even death and are always present in such an activity despite all safety precautions. Horses are unpredictable prey animals with flight as their first instinct, and while PHC has made every effort to selectively choose and properly train all school horses, safety can never be guaranteed. For that reason, ASTM/SEI approved horseback riding helmets, appropriate apparel, and strict adherence to PHC rules and regulations are mandatory at all times. A body protection vest, commonly used by Cross Country riders, may offer additional protection and is therefore approved for use at PHC if Rider chooses to own and use one.

X _____
Rider’s signature (Parent or Legal Guardian only if minor)

DATE

PRINTED NAME

Rec’d By: _____
Witness: Potomac Horse Center, Inc.

DATE