

# GLOBAL SPORT HORSES, LLC

Gianna Safizadeh

(310)-817-9007

40270 Green Meadow Road

Temecula CA 92592

1. **Voluntary Participation:** I agree that I, the undersigned, do for myself or on the behalf of my child, spouse, or legal ward here by voluntarily choose to ride, train, or participate in activities at this location.
2. **Incident Costs Responsibility and Medical Insurance Discharge:** I agree that I/we will be responsible for any and all costs incurred by me/us for injuries or property damage I/we may incur and that I/we are covered by accident-medical insurance coverage now in force.
3. **Personal Responsibility:** I agree that I am responsible for the negligent acts of my family members and/or legal wards and animals, and I do carry personal liability insurance now in force.
4. **Personal Financial Losses:** I agree that I am responsible for my own financial loss in relation to the theft or damage to my/our tack, equipment, vehicles, trailers and horses while on these premises.
5. **Protective Headgear Warning:** I agree that I have been fully warned and advised by this facility that I should purchase and wear protective headgear that meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F1163 Equestrian Helmet, while riding, being and working near horses. I understand that the wearing of such headgear while mounting, riding, jumping, showing, dismounting, and otherwise near horses may reduce severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall from a horse or other occurrences.
6. **Liability Release:** I agree that I hereby, for myself, my family members and heirs, administrators, personal representatives and assigns, do agree to hold harmless, release, and discharge this ranch facility, its owners, agents, employees, officers, directors, representatives, assigns, members, insurers, trainers, and others acting on its behalf, of all claims, demands, causes of action, and legal liability, whether the same be known or unknown, anticipated or unanticipated.

## STATEMENT OF AWARENESS

I, THE UNDERSIGNED, BEING OF LEGAL AGE, HAVE READ AND UNDERSTOOD THE FOREGOING AGREEMENT AND RELEASE.

EACH LEGAL AGE PARTICIPANT, PARENT OR LEGAL GUARDIAN OF ANY/ALL MINOR PARTICIPANTS MUST SIGN BELOW: (use back of page if multiple minor participants) ALL ADULTS MUST SIGN A WAIVER.

Print name(s) of participants: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or guardian for minor: \_\_\_\_\_ Date: \_\_\_\_\_

Name of participant(s) (minor): \_\_\_\_\_

Address in full: \_\_\_\_\_

Home/Mobile Phone# \_\_\_\_\_

Emergency Contact: Name and Phone #: \_\_\_\_\_

Email address for invoices and notices: \_\_\_\_\_