

49493 County Road 37 | Nunn, CO 80648 | 970-672-6565

WAIVER AND RELEASE OF LIABILITY

IN CONSIDERATION OF the risk of injury that exists while participating in EQUINE ACTIVITIES (hereinafter the "Activity"); and

IN CONSIDERATION OF my desire to participate in said Activity and being given the right to participate in same:

I HEREBY, for myself, my heirs, executors, administrators, assigns, or personal representatives (hereafter collectively, "Releasor," "I" or "me", which terms shall also include Releasor's parents or guardian if Releasor is under 18 years of age), knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waiver any and all rights, claims or causes of action of any king arising out of my participation in the Activity; and

I HEREBY release and forever discharge K BAR K LIVESTOCK SERVICES LLC., located at 49493 County Road 37, Nunn, Colorado 80648, their affiliates, managers, members, agents, attorney, staff, volunteers, heirs, representatives, predecessors, successors and assigns (collectively "Releases"), from any physical or psychological injury that I may suffer as a direct result of my participation in the aforementioned Activity.

I AM VOLUNTAIRLY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH PARTICIPATING IN THE ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO: PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL TO AND FROM THE ACTIVITY, OR FROM CONDITIONS AT THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY.

I FURTHER AGREE to indemnify, defend, and hold harmless the Releasees against any and all claims, suits, or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs.

I FURTHER ACKNOWLEDGE that Releasees are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Releasees. In the event that I should require medical care or treatment, I authorize K Bar K Livestock Services LLC. To provide all emergency medical care deemed necessary, including but not limited to, first aid, CPR, the use AEDs, emergency medical transport, and sharing of medical information with medical personnel I further agree to assume all costs involved and agrees to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I FURTHER ACKNOWLEDGE that this Activity may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. I agree not to participate in the Activity unless I am medically able and properly trained, and I agree to abide by the decisions of the K Bar K Livestock Services LLC. Official or agent, regarding my approval to participate in the Activity.

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEANSE AND DISCHARGE K BAR K LIVESTOCK SERVICES LLC. AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES. PREDECESSORS. SUCCESSORS AND ASSIGNS. FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION

AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST K BAR K LIVESTOCK SERVICES LLC. FOR PERSONAL INJURY OR PORPERTY DAMAGE.

To the extent that statue or case law does not prohibit release for ordinary negligence, this release is also for such negligence on the part of K Bar K Livestock Serivces LLC, its agents, and employees.

I agree that this Release shall be governed for all purposes by Colorado law, without regard to any conflict of law principles. This Release supersedes any and all previous oral or written promises or other agreements.

In the event that any damage to equipment or facilities occurs as a result of my or my family's or my agent's willful actions, neglect, or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any such actions of neglect or recklessness.

THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECT FOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THIS INITIAL AND ALL SUBSEQUENT EVENTS OF PARTICIPATION.

THIS AGREEMENT was entered into at arm's-l	anoth without duress or coercion	and is to be interpreted as an agreement
between two parties of equal bargaining streng	_	
Services LLC agree that this agreement is clear		
admitted to alter or explain the terms of this agree the purposes for which it is entered into.	eement, but that it will be interpreted	I based on the language in accordance with
In the event that any provision contained within to condition, phrase, or portion of this agreement of this agreement shall remain in full force and contained unenforceable, but that by limiting said provision to be written, constructed, and enforced as so limiting said provision.	shall be determined to be unlawful of the court should find that any on it would become valid and enforc	or otherwise unenforceable, the remainder provision of this agreement to be invalid or
In the event of an emergency, please contact the	e following person(s) in the order pre	esented:
Emergency Contact	Contact Relationship	Contact phone #
I, THE UNDERSIGNED PARTICIPANT, AFFIRM SIGNING THIS AGREEMENT. I CERTIFY THAT I AND THAT THIS RELEASE CANNOT BE MODI CONTRACT AND THAT I AM SIGNING IT OF MY	HAVE READ THIS AGREEMENT, TI FIED ORALLY. I AM AWARE THAT	HAT I FULLY UNDERSTAND ITS CONTENT

Signature ______ Date _____

Participant's Name: _____

Participant's Address: ______

PARENT / GUARDIAN WAIVER FOR MINORS

In the event that the participant is under the age of consent (18 years of age), then this release must be signed by a parent or guardian, as follows:

I HEREBY CERTIFY that I am the parent or guardian of minor(s) named below, and do hereby give my consent without reservation to the foregoing on behalf of this individual (s).

Parent / Guardian Name:		
Minor Name:	Relationship to Minor:	
Minor Name:	Relationship to Minor:	
Minor Name:	Relationship to Minor:	
Signature:	Date:	