

# WOODBROOK HUNT CLUB

## AGREEMENT FOR RELEASE AND WAIVER OF LIABILITY

### For a Minor Child

I request permission for my child, named below, to participate in cross-county riding and foxhunting with the Woodbrook Hunt Club.

I fully understand that cross country horseback riding and foxhunting (which includes riding over fences, other obstacles, and steep and rough terrain) are very dangerous activities. I wish to allow my child to participate in these activities knowing they are dangerous. I accept and assume all the risks of the injury (including death) to my child or my property. I represent and warrant that I have the authority to give this release.

In exchange for my child being permitted to participate in these activities, for my child, myself, my child's heirs, guardians, and legal representatives, I release and agree not to make or bring any claim of any kind against Woodbrook Hunt Club, or its masters, officers, directors, members, employees, or guests or any land owners, including the U.S.A/U.S. Army, Fort Lewis, or other persons making property available for Woodbrook Hunt Club, for any injury (including death), to my child or any damage to my property whether from negligence or not, or any other cause, arising out of my child's participation in these dangerous horseback riding, foxhunting or related activities; and I also agree if anyone makes any claims because of any injury to my child (including death), or for any damage to my property, I will keep all those released by this agreement free of any damages or costs because of those claims.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent

Please Complete:

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Pony Club Affiliation, if any

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Emergency Contact & Phone

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

Capping Payment: Cash \_\_\_\_\_ Check # \_\_\_\_\_

November 27, 2006

Breakfast Payment: Cash \_\_\_\_\_ Check # \_\_\_\_\_