



Maryland Therapeutic Riding, Inc. Volunteer Application

Liability Information

Name: _____
(Last Name) (First Name) (Middle Initial)

Maryland Therapeutic Riding, Inc. (MTR), its Officers, employees and agents will not be responsible for any damages to person, animal or property at the MTR riding center or its grounds. Nor will they be responsible for any property that is lost or destroyed. The undersigned volunteer/rider/parent/guardian hereby releases MTR, its officers, employees from damages, injuries, claims and damages whatsoever (including costs, expenses and attorney fees) that might result from damages, injuries or losses to person or property during, or in connection with, or arising out of any show, clinic, event or function whether or not such damages, injuries or losses result in direct or indirectly the negligent act or omission of such released parties.

WARNING: UNDER MARYLAND LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM INHERENT RISKS OF EQUINE ACTIVITIES.

In exchange for the use of property leased by MTR and other valuable consideration, I agree that my use of the premises and any animals, facilities or equipment owned or leased by MTR is at my own risk. I further agree to indemnify and hold harmless MTR their respective officers, employees and agents from any and all suits, actions or claims of any type arising from my use of premises or participation in the equine activity of such use by my guest, whether or not such claims result directly or indirectly from the negligent act or omissions of the indemnified parties or otherwise.

I acknowledge that riding and involvement with horses is a high risk activity. I have read this agreement and fully understand its consent.

SIGNED: _____
(adult volunteer/rider or parent/guardian of minor)

DATE: _____