

# PARTICIPANT AGREEMENT

## HORSES WITH HEARTS, INC.



- I, \_\_\_\_\_, an adult over the age of 18 years, acknowledge that I applied to participate in the Horses with Hearts therapeutic riding program.
- I understand that it is my responsibility to notify Horses with Hearts if I am unable to participate, or have limitations or restrictions, in riding activities for medical or any other reason, and I understand it is my responsibility to notify Horses with Hearts of any medical or other recommendations which may be made that are relevant to the riding program and attendant activities.
- I understand that I will not be covered by or eligible for any insurance coverage offered by or available through Horses with Hearts or other project sponsors.
- I give my permission for the Horses with Hearts to use, without limitation or obligation, photographs, film footage, or tape recordings which may include my image or voice for the purposes of promoting, or interpreting the Organization's programs.
- I agree to hold harmless and defend Horses with Hearts, its officers, agents, servants, and employees from any and all claims resulting from injuries, damages, losses, or death sustained by me and arising out of, connecting with, or any way associated with the activities of this Organization.
- I agree that this waiver is intended to be as broad and inclusive as permitted by the laws of the State of West Virginia. I agree that in the event any clause or provision of this Agreement shall be held to be invalid by a court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of the Agreement which shall continue to be enforceable.
- I have carefully read this agreement and fully understand its contents. By signing this agreement, I certify that I have had the opportunity to consult with counsel, or others of my choosing, prior to executing this agreement and that I sign the same voluntarily.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
On behalf of Horses with Hearts, Inc.

\_\_\_\_\_  
Date

