

Release of Liability

(BROOKSIDE FARM INC.)

I, the undersigned, wish to participate in the (**Brookside Farm**) event on _____ 20 ____ . I understand that during portions of this event I will be in close proximity to one or more horses under circumstances which may expose me to some risk of injury, because of the nature of horses, the facility, and the activities in which I will be engaged.

In consideration of the (**Brookside Farm**) allowing my participation in this event, I, on behalf of myself, and my heirs, administrators, personal representatives, assigns and children and spouse, if any, do hereby agree to hold harmless, release and discharge (**Brookside Farm**), which includes its officers, directors, members, agents, representatives, affiliates and insurers, of and from all claims, demands, causes of action and legal liability whether known or unknown, anticipated or unanticipated, due to the ordinary negligence of (**Brookside Farm**). I shall not bring any claims, demands, legal actions or causes of action against (**Brookside Farm**) for any damage or loss due to bodily injury, death or property damage arising out of my participation in this event.

WARNING

Under the Michigan equine activity liability act, an equine professional is not liable for an injury to or the death of a participant in an equine activities resulting from an inherent risks of the equine activity.

Signature of Participant

Date

Signature of Parent or Guardian
(If participant is a minor.)

Date