



GALWAY DOWNS
38801 LOS CORRALITOS ROAD, TEMECULA, CA 92592
T: 951.303.0405 | F: 951.303.6055

Horseback Riding/ Track Training/ Facility Membership Agreement & Release of Liability

Owner/Rider's Name: _____

Date of Birth: _____

Phone Number: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Emergency Contact: _____

Relationship: _____

Phone Number: _____

LIABILITY RELEASE: I understand that this is a high-risk sport and I am participating at my own risk. I hereby assume this risk and further do hereby release and hold harmless the owners of the property, and its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps and race track on which 'the equestrian activity' is held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse or horses which I will ride at this facility.

Release, Assumption of Risk, Waiver and Indemnification

This document waives important legal rights. Read it carefully before signing.

In consideration for my participation in this 'equestrian activity' at Galway Downs, I agree to the following:

I AGREE that I choose to participate voluntarily in the 'equestrian activity' with my horse, as a rider, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death ("Harm").

I AGREE to release 'the equestrian activity' the property owners, and its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps where 'the equestrian activity' is held from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of 'the equestrian activity'.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of 'the equestrian activity' the property owners, and its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps where 'the equestrian activity' is held.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) 'the equestrian activity' the property owners, and its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps where 'the equestrian activity' is held and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse at this facility.

I am entitled to wear protective equipment without penalty, and I acknowledge that 'the equestrian activity' the property owners, and its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps where 'the equestrian activity' is held strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries.

If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf.

I AGREE that "the equestrian activity" as used above includes all the property owners, its agents, employees, volunteers, the host of this 'equestrian activity' and the owners of the jumps where 'the equestrian activity' is held.

I represent that I have the requisite training, coaching and abilities to safely compete in this equestrian activity.

BY SIGNING BELOW, I AGREE to be bound by all applicable terms and provisions of this riding agreement.

OWNER/RIDER'S SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____

Required if Rider is Under 18