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ENTRY A	GREEMENT -	Release, Assu	mption of Risk, Waive	r, and Indemnification.	This document waives		-		y before signing.					DUE WITH ENTRY				
		, ,	• •	etition to the following		ement, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.						Early Horse Stall \$175 Discount until January 14, 2025						
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fully awa suffering	that I choose t ire and acknov , or death. ("H	to participate v vledge that ho larm").	voluntarily in the Com orse sports and the Com	petition with my horse mpetition involve inher	as a rider, handler, lo ent dangerous risks of	ngeur, le accident	ssee, own t, loss, and	er, agent, I serious k	coach, trainer, or odily injury inclu	as parent o ding broke	or guardi n bones,	an of a junior exh head injuries, tra	ilbitor. I am iuma, pain,	E <i>N</i> Re	IT Standb gistratior oen Arena	Fee	\$55 \$35 \$45	
I AGREE my horse	to hold harmle to others, eve	ess and release en if the Harm	e the USHJA and the C arises or results, direc	Competition from all cla tly or indirectly, from th	ms for money damag e negligence of the U	es or oth SHJA or 1	erwise for he Compe	for any Harm to me or my horse and for any Harm of any nature caused by me or petition. RV resevations must be theclassicshowslive@g					t be em					
	• •			-		-		HJA or the Competition.						ASSOCIATION				
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quard ag	s <b>tand</b> that I ar ainst all injuri	m entitled to v es. If I am a pa	vear protective equipr Irent or quardian of a j	ment without penalty, a junior exhibitor, I conse	nd I acknowledge tha nt to the child's partici	t the USI pation a	HJA strong nd AGREE	ily encour to all of ti	ages me to do so 1e above provisior	while WAR ns and AGR	NING the EE to ass	at no protective e sume all of the ob	quipment of ligations of	an 🖵	-	ntry B	ank	
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ENTRY A	GREEMENT -	Release. Assur	mption of Risk. Waive					al d it carefully before signing.										
I AGREE	in consideration	on for my part	icipation in this Comp	petition to the follow	ng:		j			-					rly Horse		\$175	
	I AGREE that the "Competition" as used herein includes the USHJA and Competition Management, as well as all of their offic									5 1	,			I	scount un	til Janud	•	025
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quard aq	ainst all iniurie	es. If I am a pa	rent or quardian of a	iunior exhibitor. I con	sent to the child's part	icipation	and AGRE	to all of t	he above provisio	ons and AGR	EE to as	sume all of the ob	oligations o	f		Entry B	lank	
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City/State/Zip       March 7 - 9, 2025       Phone       UstuA #         Phone       UstuA #       Phone       UstuA #         Final       Stable With       Stable With       Stable With         Name       Anateur - Circle Age 18-35 3660       Name       Anateur - Circle Age 18-35 3660         Address       UstUA #       Kinder Signa       Anateur - Circle Age 18-35 3660       Name         Ity/State/Zip       Jr - Birthdate       City/State/Zip       Jr - Birthdate       UstUA #         Final       UstUA #       Email       City/State/Zip       Jr - Birthdate       Issua #         Color       Age       See       HossE USHJA #       NiDER       CLASS NUMBERS ENTERED         Color       Age       See       Height       2       Intervention       ADEPOSIT OF \$200         DUE WHIT ENTRACE       Stable Age 18 and Series USHJA #       NoREE Class NUMBERS ENTERED       ADEPOSIT OF \$200         Color       Age       See       Height       2       Intervention       ADEPOSIT OF \$200         DUE WHIT ENTRACE       Norse Class Age 2       Intervention       ADEPOSIT OF \$200       DUE with #         NAGEE to inderso Septis and it Competition invole infraction. This document wairs important legal d t carefuly before signing.       S223
March 7 - 9, 2025   Phone USHUA #   Email Email   USHUA # Email   USHUA # Stable With   RIDER TWO (2) INFORMATION   Name Address   USHUA # Interference   Interference Interference   Interference Interference   Interference Interference   Interference Interference   Interference Interference   Interference Interference   USHUA Outreach Competition Entry Agreement   USHUA Outreach Competition Entry Agreement <t< td=""></t<>
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Email         Email           NAME OF HORSE         HORSE USHJA #         RIDER         CLASS NUMBERS ENTERED           Color         Age         Sex         Height         2         Image: Class Number Sentered         Image: Sex         Appe: Sex         Height         2         Image: Sex         Appe: Sex         Height         2         Image: Sex         A DEPOSIT OF \$200           USHJA Outreach Competition Entry Agreement           ENTRY AGREEMENT - Release, Assumption of Risk, Waiver, and Indemnification. This document waives important legal dit carefully before signing.         A DEPOSIT OF \$200           JAGREE in consideration for my participation in this Competition with my hores, as a rider, handler, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am griftering or dealwer, ("Harm").         A DEPOSIT OF \$200           JUSE Section 1000000000000000000000000000000000000
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USHJA Outreach Competition Entry Agreement       A DEPOSIT OF \$200         ENTRY AGREEMENT - Release, Assumption of Risk, Waiver, and Indemnification. This document waives important legal d it carefully before signing.       A DEPOSIT OF \$200         J AGREE to inderation for my participation in this Competition Management, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.       Early Horse Stall       \$175         J AGREE to the "Competition as used herein includes the USHJA and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm").       S55       Registration Fee       \$35         J AGREE to hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse, and for any Harm of any nature caused by me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       ASSOCIATION FEES         Understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to do so while WARNING that no protective equipment cran this Relaxies on the chid's befalt Persent that I have the requisite training, coaching and abilities to affer competition BS (SIGNING BELOW.) AGREE to be bound by the terms and or now y use that entry Blank, (OVID-19 & EHV Protocols. If I am signing and abilities to affer competition ing, caching and abilities to affer comparison and AGREE to assume all of the obligations of this Prize List, Entry Blank, (OVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall
USHJA Outreach Competition Entry Agreement           A DEPOSIT OF \$200 DUE WITH ENTRY           ENTRY AGREEMENT - Release, Assumption of Risk, Waiver, and Indemnification. This document waives important legal d it carefully before signing.         A DEPOSIT OF \$200 DUE WITH ENTRY           I AGREE that the "Competition" as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.         Early Horse Stall         \$225           HAGREE that I choose to participate voluntarily in the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm").         S225         EMT Standby \$255         \$255           I AGREE to hold harmless and release the USHJA and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the USHJA or the Competition.         RV resevations must be email to: theclassicshowslive@gmail.com           I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and or this Release on the child's behalf I perseent that have the requisite training, coaching and abilities to safely compete in this competition BY SIONING BELOW, I AGREE to assume all of the obligations of this Release on the child's behalf I perseent that have the requusite training, coaching and abilities to afget compete t
DUE WITH ENTRY       DUE WITH ENTRY         I AGREE in consideration for my participation in this Competition to the following:       DUE WITH ENTRY         I AGREE that the "Competition" as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.       Lagree that the "Competition" as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.       Horse Stall       \$175         J AGREE that I choose to participate voluntarily in the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, fully aware and acknowledge that horse sports and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by receive agemail.com       KV resevations must be email to: the classicshowslive@gmail.com         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition.       KV resevations must be email to: the classicshowslive@gmail.com         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition.       ASSOCIATION FEES         USHA Outreach Fee       \$55         Quard 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 all of the obligations of this Prize List, Entry Blank, (OVID-19, & EHV Protocols. If I am signing and submitting this Agreement electronic
I AGREE in consideration for my participation in this Competition to the following:       \$175         I AGREE that the "Competition" as used herein includes the USHJA and Competition Management, as well as all of their officials, officers, employees, agents, personnel, volunteers and affiliates.       S175         I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, handler, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, withring, or death. ("Harm").       Harre to hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       FW resevations must be email to: the class:cshowslive@gmail.com         I AGREE to hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       RV resevations must be email to: the class:cshowslive@gmail.com         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition.       USHA Outreach Fee       \$55         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to do so while WARNING that no protective equipment consthibor, I
I AGREE that the competition as used netern includes the OSIDA and competition with my horse, as a rider, handler, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am suffering, or death. ("Harm").         I AGREE to hold harmless and release the USHJA and the Competition 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 hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse, and for any Harm of any nature caused by me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for any Harm caused by me or my horse, while at the Competition.         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition 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 while at the Competition.         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to do so while WARNING that no protective equipment can provisions of this Prize List, Entry Blank, (DVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same valide the entry blank only.         Vis for each effect as if a fiftixed my signature by my own hand.       RIDER/HANDLER 1
I AGKEE that I choose to participate voluntarily in the Competition with my horse, as a rider, handler, longeur, lessee, owner, agent, coach, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death. ("Harm").       EMT Standby \$55         I AGREE to hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       FW resevations must be email to: the classicshowslive@gmail.com         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition.       S5       SCA Drug Fee       \$5         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to do so while WARNING that no protective equipment can 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 Prize List, Entry Blank, COVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same valid.       If horse is showing in USEF rated show - use that entry blank only.         Vist, force and effect as if I affixed my signature by my own hand.       I DER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
I AGREE to hold harmless and release the USHJA and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the USHJA or the Competition.       RV resevations must be email to: theclassicshowslive@gmail.com         I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       ASSOCIATION FEES         I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for any Harm caused by me or my horse while at the Competition.       SSOCIATION FEES         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA strongly encourages me to do so while WARNING that no protective equipment caused by the trems and 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 all of the obligations of this Prize List, Entry Blank, COVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validities to safely compete in this competition BY SIGNING BELOW, I AGREE to be bound by the terms and show - use that entry blank only.       If horse is showing in USEF rated show - use that entry blank only.         Wresewations must be email to:       RIDER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the USHJA or the Competition.       AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for the competition.       ASSOCIATION FEES         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA 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 all of the above provisions of this Prize List, Entry Blank, (OVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same value it, force and effect as if I affixed my signature by my own hand.       If horse is showing in USEF rated show - use that entry blank only.         OWNER (Mandatory)       RIDER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USHJA and the Competition 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 while at the Competition.       USHJA Outreach Fee \$5         I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA 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 represent that I have the requisite training, coaching and abilities to safely compete in this competition BY SIGNING BELOW, I AGREE to be bound by the terms and provisions of this Prize List, Entry Blank, COVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same valid-ity, force and effect as if I affixed my signature by my own hand.       RIDER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the USHJA 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 represent that I have the requisite training, coaching and abilities to safely compete in this competition BY SIGNING BELOW, I AGREE to be bound by the terms and provisions of this Prize List, Entry Blank, COVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same valid-ity, force and effect as if I affixed my signature by my own hand.       If horse is showing in USEF rated show - use that entry blank only.         OWNER (Mandatory)       RIDER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
this Release on the child's behalf I represent that I have the requisite training, coaching and abilities to safely compete in this competition BY SIGNING BELOW, I AGREE to be bound by the terms and provisions of this Prize List, Entry Blank, COVID-19 & EHV Protocols. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same valid- ity, force and effect as if I affixed my signature by my own hand. <b>OWNER (Mandatory)</b> <b>RIDER/HANDLER 1 (Mandatory)</b> <b>RIDER/HANDLER 2</b>
ity, force and effect as if   affixed my signature by my own hand.       Show - use that entry blank only.         OWNER (Mandatory)       RIDER/HANDLER 1 (Mandatory)       RIDER/HANDLER 2
OWNER (Mandatory) RIDER/HANDLER 1 (Mandatory) RIDER/HANDLER 2
Make checks payable to:
Signature:     Signature:     Signature:     FoxFarms, Inc.       P.O. Box 1402     P.O. Box 1402
Print Name: Print Name: Print Name: Rancho Murieta, CA 95683
TRAINER/COACH (Mandatory)       PARENT/GUARDIAN (if Rider 1 is a minor)       PARENT/GUARDIAN (if Rider 2 is a minor)       Entries Due:         Signature:       Signature:       Signature:       Signature:       Signature:       Signature:
Questions:
Print Name: Print Name: (916) 305-8898
Credit Card Information: Name on Card:Billing Address:
□ Visa □ Discover
Image: Credit Card #
I authorize FoxFarms, Inc. to charge my credit card plus 3.5% (see rule 8) for all amounts due with respect to this entry

### NWC I OUTREACH/SAHJA MURIETA EQUESTRIAN CENTER ASSUMPTION OF RISK AND WAIVER

For valuable consideration and to induce permission to participate in equestrian activities held at Murieta Equestrian Center ("MEC"), 7200 Lone Pine Drive, Rancho Murieta, CA 95683, each of the undersigned agrees to the following terms and makes the following warranties: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any equestrian event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases such as COVID-19), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or man made objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of MEC or Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers. With this in mind, I accept full responsibility for my own safety and EXPRESSLY AS-SUME ALL RISKS OF HARM, whether foreseen or unforeseen while participating in equestrian activities at the Murieta Equestrian Center. I am physically fit and know of no medical or health reason why I should not participate in this activity.

I hereby RELEASE and agree to DEFEND, INDEMNIFY AND HOLD HARMLESS MEC, Cosumnes Corporation, FoxFarms Inc., their shareholders, officers, employees, agents, instructors, equipment manufacturers, lessors, and insurers (hereinafter collectively referred to as "Parties Released"), from and against any liability, demand, claim, or right of action for any damage or injury, including paralysis or death, to any person or property, even if such damage or personal injury results from the NEGLIGENCE of MEC or other Parties Released. I further COVENANT NOT TO SUE or make any demand or claim against MEC or other Parties Released, for or by reason of any such damage or personal injury from my participation in equestrian activities at MEC. I will pay all fees, damages, and costs, including attorney fees that MEC or other Parties Released may incur in the enforcement of this agreement. A signed liability waiver is a condition to your participation in any event. Failure to sign will lead to your disqualification and removal from property. I have carefully read this document and fully understand its contents, which I adopt as a completely integrated and exclusive statement of the entire terms of agreement. PUBLISHING OF PICTURES, VIDEOS, & COMPETITION SHOTS ON PROPERTY - Murieta Equestrian Center may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage, or benefit of the competition, sport, or facility.

# I HEREBY ACKNOWLEDGE I DO NOT HAVE A FEVER, SORE THROAT, TEMPERATURE, SHORTNESS OF BREATH OR COUGH AND HAVE NOT BEEN AROUND ANYONE DIAGNOSED WITH COVID-19 IN THE LAST 14 DAYS. I HAVE REVIEWED AND ACKNOWLEDGE & WILL ADHERE TO ALL AFOREMENTIONED REQUIRE-MENTS WITH SPECIAL ATTENTION TO COVID-19 SOCIAL DISTANCE PROTOCOLS AND REQUIREMENTS.

SIGNATURE:	F	PRINTED NAME:	
ADDRESS:		CITY:	_STATE:ZIP:
TELEPHONE NUMBER:	_ CELL PHONE NUMBER:	E-MAIL ADDRESS:	

### **Guardian Representation:**

PRINT FULL NAME OF MINOR CHILD:		PRINT PARENT/GUARDIAN FULL N	AME:		
MINOR CHILD DOB:	ADDRESS:	CITY:		_STATE:	_ZIP:
PARENT/ GUARDIAN SIGNATURE:		DATE:			
EMERGENCY NUMBERS:		EVENING:	_WEEKEND:		

# NWC II OUTREACH/SAHJA MURIETA EQUESTRIAN CENTER ASSUMPTION OF RISK AND WAIVER

For valuable consideration and to induce permission to participate in equestrian activities held at Murieta Equestrian Center ("MEC"), 7200 Lone Pine Drive, Rancho Murieta, CA 95683, each of the undersigned agrees to the following terms and makes the following warranties: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any equestrian event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases such as COVID-19), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or man made objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of MEC or Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers. With this in mind, I accept full responsibility for my own safety and EXPRESSLY AS-SUME ALL RISKS OF HARM, whether foreseen or unforeseen while participating in equestrian activities at the Murieta Equestrian Center. I am physically fit and know of no medical or health reason why I should not participate in this activity.

I hereby RELEASE and agree to DEFEND, INDEMNIFY AND HOLD HARMLESS MEC, Cosumnes Corporation, FoxFarms Inc., their shareholders, officers, employees, agents, instructors, equipment manufacturers, lessors, and insurers (hereinafter collectively referred to as "Parties Released"), from and against any liability, demand, claim, or right of action for any damage or injury, including paralysis or death, to any person or property, even if such damage or personal injury results from the NEGLIGENCE of MEC or other Parties Released. I further COVENANT NOT TO SUE or make any demand or claim against MEC or other Parties Released, for or by reason of any such damage or personal injury from my participation in equestrian activities at MEC. I will pay all fees, damages, and costs, including attorney fees that MEC or other Parties Released may incur in the enforcement of this agreement. A signed liability waiver is a condition to your participation in any event. Failure to sign will lead to your disqualification and removal from property. I have carefully read this document and fully understand its contents, which I adopt as a completely integrated and exclusive statement of the entire terms of agreement. PUBLISHING OF PICTURES, VIDEOS, & COMPETITION SHOTS ON PROPERTY - Murieta Equestrian Center may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage, or benefit of the competition, sport, or facility.

### I HEREBY ACKNOWLEDGE I DO NOT HAVE A FEVER, SORE THROAT, TEMPERATURE, SHORTNESS OF BREATH OR COUGH AND HAVE NOT BEEN AROUND ANYONE DIAGNOSED WITH COVID-19 IN THE LAST 14 DAYS. I HAVE REVIEWED AND ACKNOWLEDGE & WILL ADHERE TO ALL AFOREMENTIONED REQUIRE-MENTS WITH SPECIAL ATTENTION TO COVID-19 SOCIAL DISTANCE PROTOCOLS AND REQUIREMENTS.

SIGNATURE:		PRINTED NAME:				
ADDRESS:		_CITY:		STATE:	_ZIP:	
TELEPHONE NUMBER:	CELL PHONE NUMBER:		E-MAIL ADDRESS:			

### **Guardian Representation:**

PRINT FULL NAME OF MINOR CHILD:		PRINT PARENT/GUARDIAN FU	PRINT PARENT/GUARDIAN FULL NAME:				
MINOR CHILD DOB:	ADDRESS:	CITY:		STATE:	_ZIP:		
PARENT/ GUARDIAN SIGNATURE:		DAT	E:				
EMERGENCY NUMBERS:		EVENING:	WEEKEND:				

### NWC III OUTREACH/SAHJA MURIETA EQUESTRIAN CENTER ASSUMPTION OF RISK AND WAIVER

For valuable consideration and to induce permission to participate in equestrian activities held at Murieta Equestrian Center ("MEC"), 7200 Lone Pine Drive, Rancho Murieta, CA 95683, each of the undersigned agrees to the following terms and makes the following warranties: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any equestrian event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases such as COVID-19), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or man made objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of MEC or Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers. With this in mind, I accept full responsibility for my own safety and EXPRESSLY AS-SUME ALL RISKS OF HARM, whether foreseen or unforeseen while participating in equestrian activities at the Murieta Equestrian Center. I am physically fit and know of no medical or health reason why I should not participate in this activity.

I hereby RELEASE and agree to DEFEND, INDEMNIFY AND HOLD HARMLESS MEC, Cosumnes Corporation, FoxFarms Inc., their shareholders, officers, employees, agents, instructors, equipment manufacturers, lessors, and insurers (hereinafter collectively referred to as "Parties Released"), from and against any liability, demand, claim, or right of action for any damage or injury, including paralysis or death, to any person or property, even if such damage or personal injury results from the NEGLIGENCE of MEC or other Parties Released. I further COVENANT NOT TO SUE or make any demand or claim against MEC or other Parties Released, for or by reason of any such damage or personal injury from my participation in equestrian activities at MEC. I will pay all fees, damages, and costs, including attorney fees that MEC or other Parties Released may incur in the enforcement of this agreement. A signed liability waiver is a condition to your participation in any event. Failure to sign will lead to your disqualification and removal from property. I have carefully read this document and fully understand its contents, which I adopt as a completely integrated and exclusive statement of the entire terms of agreement. PUBLISHING OF PICTURES, VIDEOS, & COMPETITION SHOTS ON PROPERTY - Murieta Equestrian Center may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage, or benefit of the competition, sport, or facility.

### I HEREBY ACKNOWLEDGE I DO NOT HAVE A FEVER, SORE THROAT, TEMPERATURE, SHORTNESS OF BREATH OR COUGH AND HAVE NOT BEEN AROUND ANYONE DIAGNOSED WITH COVID-19 IN THE LAST 14 DAYS. I HAVE REVIEWED AND ACKNOWLEDGE & WILL ADHERE TO ALL AFOREMENTIONED REQUIRE-MENTS WITH SPECIAL ATTENTION TO COVID-19 SOCIAL DISTANCE PROTOCOLS AND REQUIREMENTS.

SIGNATURE:		PRINTED NAME:			
ADDRESS:		CITY:		STATE:	_ZIP:
TELEPHONE NUMBER:	CELL PHONE NUMBER:	E-MAI	LADDRESS:		

### **Guardian Representation:**

PRINT FULL NAME OF MINOR CHILD:	PRINT PARENT/GUARDIAN FULL NAME:	
MINOR CHILD DOB: ADDF	RESS:CITY:	STATE: ZIP:
PARENT/ GUARDIAN SIGNATURE:	DATE:	
EMERGENCY NUMBERS:	EVENING:WEEKEND:	

## NWC IV OUTREACH/SAHJA MURIETA EQUESTRIAN CENTER ASSUMPTION OF RISK AND WAIVER

For valuable consideration and to induce permission to participate in equestrian activities held at Murieta Equestrian Center ("MEC"), 7200 Lone Pine Drive, Rancho Murieta, CA 95683, each of the undersigned agrees to the following terms and makes the following warranties: I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with the sport of equestrian and know that horseback riding and related equestrian activities are inherently dangerous, and that participation in any equestrian event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases such as COVID-19), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or man made objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of MEC or Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers. With this in mind, I accept full responsibility for my own safety and EXPRESSLY AS-SUME ALL RISKS OF HARM, whether foreseen or unforeseen while participating in equestrian activities at the Murieta Equestrian Center. I am physically fit and know of no medical or health reason why I should not participate in this activity.

I hereby RELEASE and agree to DEFEND, INDEMNIFY AND HOLD HARMLESS MEC, Cosumnes Corporation, FoxFarms Inc., their shareholders, officers, employees, agents, instructors, equipment manufacturers, lessors, and insurers (hereinafter collectively referred to as "Parties Released"), from and against any liability, demand, claim, or right of action for any damage or injury, including paralysis or death, to any person or property, even if such damage or personal injury results from the NEGLIGENCE of MEC or other Parties Released. I further COVENANT NOT TO SUE or make any demand or claim against MEC or other Parties Released, for or by reason of any such damage or personal injury from my participation in equestrian activities at MEC. I will pay all fees, damages, and costs, including attorney fees that MEC or other Parties Released may incur in the enforcement of this agreement. A signed liability waiver is a condition to your participation in any event. Failure to sign will lead to your disqualification and removal from property. I have carefully read this document and fully understand its contents, which I adopt as a completely integrated and exclusive statement of the entire terms of agreement. PUBLISHING OF PICTURES, VIDEOS, & COMPETITION SHOTS ON PROPERTY - Murieta Equestrian Center may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage, or benefit of the competition, sport, or facility.

### I HEREBY ACKNOWLEDGE I DO NOT HAVE A FEVER, SORE THROAT, TEMPERATURE, SHORTNESS OF BREATH OR COUGH AND HAVE NOT BEEN AROUND ANYONE DIAGNOSED WITH COVID-19 IN THE LAST 14 DAYS. I HAVE REVIEWED AND ACKNOWLEDGE & WILL ADHERE TO ALL AFOREMENTIONED REQUIRE-MENTS WITH SPECIAL ATTENTION TO COVID-19 SOCIAL DISTANCE PROTOCOLS AND REQUIREMENTS.

SIGNATURE:		PRINTED NAME:				
ADDRESS:		_CITY:	_STATE:ZIP:			
TELEPHONE NUMBER:	_ CELL PHONE NUMBER:	E-MAIL ADDRESS:				

### **Guardian Representation:**

PRINT FULL NAME OF MINOR CHILD:		PRINT PARENT/GUARDIAN FL	LL NAME:		<u>.</u>
MINOR CHILD DOB:	ADDRESS:	CITY:		_ STATE:	_ZIP:
PARENT/ GUARDIAN SIGNATURE:		DAT	E:		
EMERGENCY NUMBERS:		EVENING:	WEEKEND:		