

**UNH Equine Program
Assumption of Risk and Waiver Agreement
for Use of the Equine Cross Country Course**

Name (please print): _____

UNH agrees to allow the above-named individual (referred to herein as "User") to use the Equine Cross Country Course for the period of _____, subject to the User's compliance with the Equine Center Rules and Regulations. Failure to abide by the Rules and Regulations will result in immediate removal of the User's horse from the premises.

A negative Coggins test within 1 year is required and a copy must be submitted with this form.

I understand that: (a) use of the UNH equine facilities involves risks and dangers of serious bodily injury, including permanent disability, paralysis and death; (b) these risks and dangers may be caused by User's own actions or inactions, the actions or inactions of other Users of the facilities, and the conditions of the facilities themselves. I understand that the risks inherent in equine activities include, but are not limited to, the propensity of an equine to behave in ways that may result in injury to persons around them; the unpredictability of an equine's reaction to sounds, sudden movements and unfamiliar objects, people or animals; hazards such as surface and subsurface conditions not obvious to the equine participant; and collisions with other equines or objects. With this understanding, I accept and assume all such risks and all responsibility for losses, costs and damages incurred in the course of using UNH equine facilities, including losses resulting from injury, death or disability.

I understand that use of the UNH equine facilities is at my own risk, without supervision by UNH. I understand that I have the sole responsibility for knowing the range of my ability to manage, care for, and control my equine, and I have the duty to act within the limits of my own abilities and to maintain reasonable control of the equine at all times, to heed all posted warnings, and to refrain from acting in a manner which may cause or contribute to the injury of any person. I hereby waive each and every claim for losses or damages resulting from any injury, death, disability or property damage resulting from my use of the equine facilities, and I agree to indemnify, defend and hold harmless UNH, the University System of New Hampshire, and their trustees, officers, employees, agents and volunteers from any and all claims, losses or damages accruing or resulting from my use of the UNH equine facilities.

In case there is an emergency involving me, please notify _____ at the following telephone number: _____.

Signature (User)

Date